Alberta
HEALTH AND WELLNESS

Ambulatory
Care
Classification
System

Alberta Ambulatory Care Reporting Manual

Effective April 2000
(Revised May 2001)

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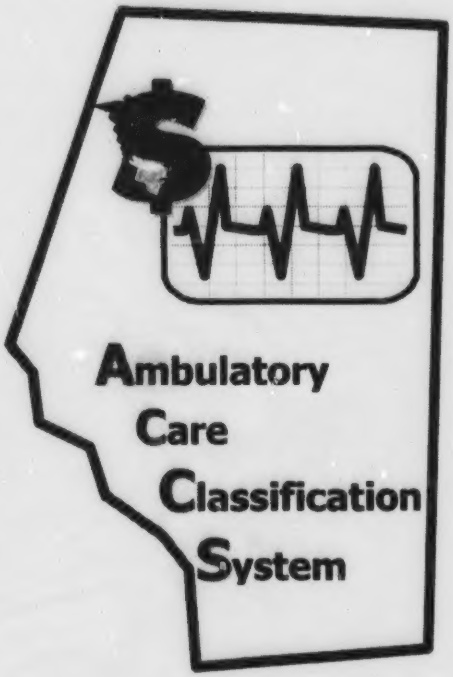
Alberta Ambulatory Care Reporting Manual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Alberta Ambulatory Care Reporting Manual

Introduction

Background

The Ambulatory Care Classification System (ACCS) was developed in Alberta through the Ambulatory Care Classification Project which was in existence from April 1994 – September 1995. The intent of the project was to create a fully integrated ambulatory care patient classification system for acute care facilities. The project began with a review of existing groupers and used these in combination with Alberta data to develop ACCS. In addition to advice and input from ambulatory care clinical experts, Alberta data from several hospitals were used in the grouper development. Data have been collected by the regions for ACCS and submitted to Alberta Health and Wellness since 1997.

The data collected for the ACCS grouper are used to classify ambulatory service recipients into clinical groups with similar resource needs and clinical profiles. The collection of data for the ACCS grouper does not replace MIS (Management Information System) reporting of workload statistics and costs nor does it replace data collection of additional elements required for purposes of management, service recipient satisfaction results or quality assurance.

The major reason underlying ACCS grouper/Minimum Data Set development and subsequent data collection is to provide useful information for utilization analyses and management, for both hospitals and the provincial government. Consistent and accurate collection of these data elements is integral to the ACCS grouper, which is used to develop the Ambulatory Care relative value index (RVI) and subsequently resource allocation through the population based funding formula.

Purpose of the Manual

This manual is intended to outline reporting requirements for Regional Health Authorities (RHAs) collecting the Alberta Ambulatory Care Minimum Data Set, and should be used at information sessions covering the data elements. This manual should be referred to throughout the development, implementation, and maintenance phases of collecting the data elements. The defined set of common data elements collected by the RHAs is described in the Data Elements section where both mandatory and optional elements are outlined.

In addition to the data elements, a fairly extensive listing of coding guidelines and reporting examples is provided. As well, Sections 1 – 7 outline:

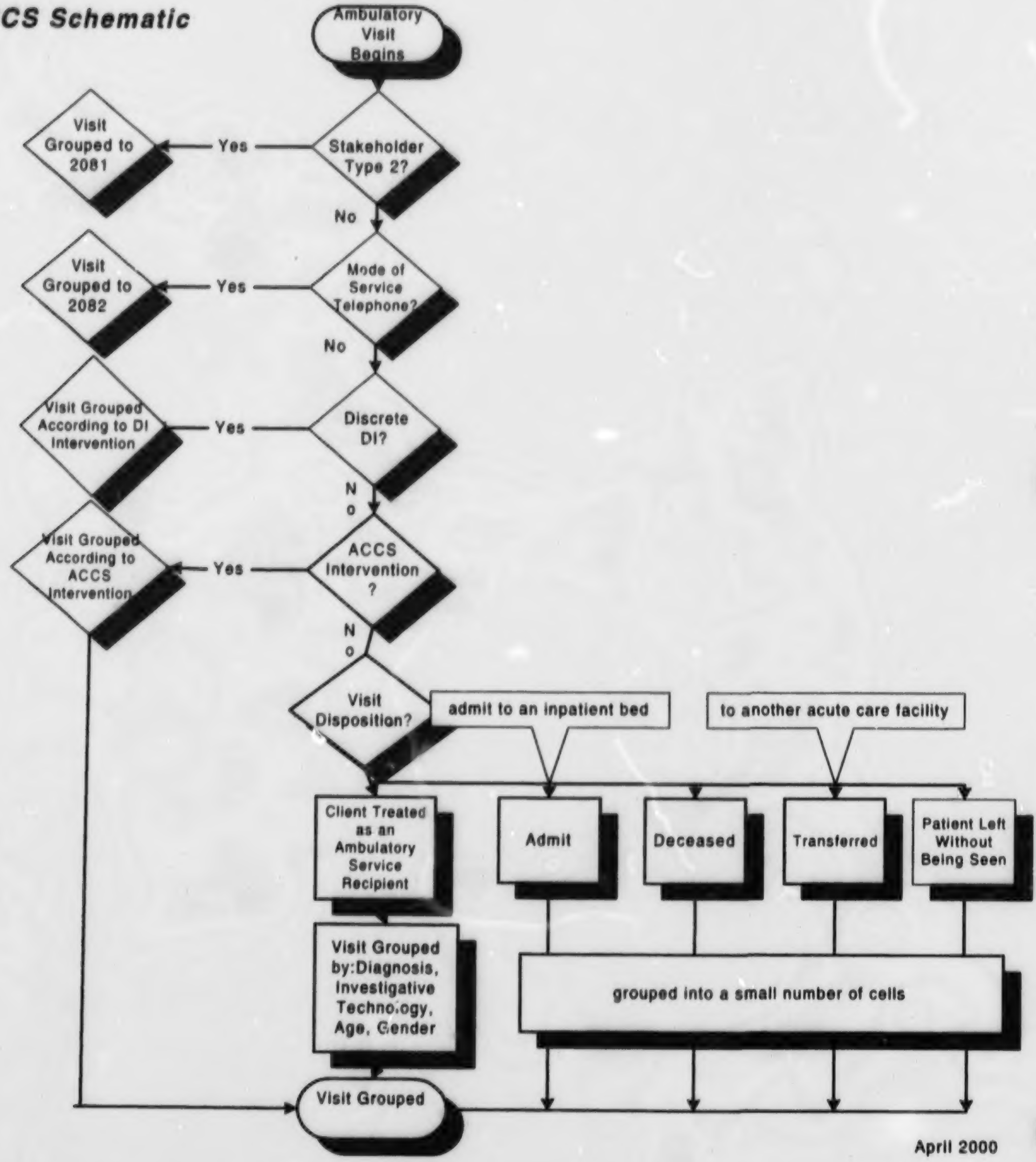
- List of ACCS Grouper Cells and Names
- List of Developed Interventions & Descriptions
- List of ACCS Investigative Technologies
- ICD-9-CM Intervention Codes Valid for use in ACCS
- MIS Primary Accounts Valid for ACCS Reporting

Introduction

- Delivery Organization Listing and the
- ACCS Grouper Logic Schematic

For clarification or further information on any of the reporting requirements, contact Alberta Health & Wellness at (780) 427-7040

ACCS Schematic


Ambulatory Visit Begins
Stakeholder Type 2?
Yes
Visit Grouped to 2081
No
Mode of Service Telephone?
Yes
Visit Grouped to 2082
No
Discrete DI?
Yes
Visit Grouped According to DI Intervention
No
ACCS Intervention ?
Yes
Visit Grouped According to ACCS Intervention
No
Visit Disposition?
admit to an inpatient bed
to another acute care facility
Client Treated as an Ambulatory Service Recipient
Admit
Deceased
Transferred
Patient Left Without Being Seen
Visit Grouped by:Diagnosis, Investigative Technology, Age, Gender
grouped into a small number of cells
Visit Grouped

April 2000

Data Set

The elements included in the data set were chosen to provide maximum flexibility. The goal was to build a data set that could be linked with other data systems. Three kinds of data are required to classify ambulatory care service recipients and evaluate ambulatory care programs:

1. Data required to classify service recipients according to clinical homogeneity (ACCS grouper). All hospitals will submit these data elements in order to have their visits grouped. Examples of these data elements include age, gender intervention/diagnosis code and service recipient disposition.

2. Data needed to develop predicted resource needs. A relative value index (RVI) has been developed for funding and other resource allocation decisions. These RVIs are based on the patient specific costs in ambulatory care programs collected by some costing regions participating in the Alberta Costing partnership.

   These costing data include provider type, time taken for service recipient care, resources consumed in terms of diagnostic/supplies/drugs, and other costs in providing care that affect resource needs.

3. The developed RVIs are provincial in nature and applicable to all hospitals.

To enable the Ambulatory Care activity data to be useful in population based funding, additional information regarding patient demographics, service date and provider location are also required to be collected.

Introduction

ALBERTA AMBULATORY CARE MINIMUM DATA SET ELEMENTS

revised: April 2000

MANDATORY ACCS GROUPER DATA ELEMENTS	REQUIRED FOR GROUPING	COMMENTS
[illegible]		
1. Province Code		- Necessary for submission of data.
2. Delivery Organization		
3. Submission Period		
4. Submission Number		
5. Submission Type		
Demographic		
6. Personal Health Number		- Linkage to claims database and linkage of episode of care in hospitals
7. Responsibility for Payment		- Used to exclude federal government, WCB, etc.
8. Postal Code		- Used at regional level - Track service flow between regions
9. Birth Date	✔	- YYYYMMDD - Used to calculate age in conjunction with visit date and also for per capita calculations
10. Gender	✔	- Male - Female - Other
11. Institution From		- Indicates service recipients referred in from acute care facility, also tracks service flows between regions
Clinical		
12. Service Visit Date	✔	- YYYYMMDD - Used to calculate age for service recipient classification
13. Physician Number		- The facility assigned physician number or ULI of doctor responsible for care/treatment of the service recipient
14. Provider Types		- Mandatory for mental health service recipients; optional for all others
15. MIS Primary Code		- Identifies the ambulatory care services provided
16. Mode of Service	✔	- Indicates service is provided face to face, off site, in group therapy, etc.
17. Disposition	✔	- Identifies service recipient's type of separation
18. Diagnosis Prefix		- Blank or Q for questionable or query diagnosis

Introduction

MANDATORY ACCS GROUPER DATA ELEMENTS	REQUIRED FOR GROUPING	COMMENTS
19. Main Ambulatory Care Diagnosis	✓	• Diagnosis condition, problem or intervention that is the main reason for the visit • For multiple diagnosis, main is the one responsible for the greatest use of resources
20. Secondary Diagnoses	✓	• Conditions or problems influencing a service recipient's treatment – maximum of 5 occurrences
21. E-Codes		• Mandatory for Emergency service recipients
22. Anesthetic Type	✓	• Indicates general, spinal/ epidural, etc.
23. Main Intervention	✓	• Identifies intervention performed during a service recipient's visit
24. Other Interventions	✓	• Maximum of 9 occurrences
25. Intervention Suffix		• Used to further specify an intervention
26. Registration Time		• HHMM • Time service recipient registered at facility
27. Disposition Time		• HHMM • Time service provider discharges client

OPTIONAL ACCS GROUPER DATA ELEMENTS	COMMENTS
28. Date Visit Completed	• YYYYMMDD
29. Triage Level	• Applicable only to service recipients seen in Emergency Department
30. Residence Name	• First seven letters of the name of the place of residence of the service recipient
31. Doctor Type	• Describes role of physician associated with service recipient
32. Doctor Service	• Reflects level of training or specialty of physician • Not appropriate to report a doctor service without reporting physician number
33. Chart Number	• Aids in service recipient identification
34. Stakeholder Type	• Identifies whether the stakeholder is a person or an organization
35. Referral Source	• Identifies the type of person or agency making the referral
36. Referred-to Agency	• Identifies the type of person or agency to which a service recipient is referred to

Progress Report

ACCS data collection has increased from 1998-99 to 1999-2000. The majority of RHAs have indicated they are collecting and submitting over 90% of their ambulatory care activity to Alberta Health and Wellness, with close to 100% collection of Emergency and Day Procedure visits. The following table lists the increases in data submissions on a regional basis from 1998-99 to 1999-2000.

ACCS Data Collection by Region

Region	1998/99 Records Submitted	1999/00 Records Submitted	Change over 1998/99
Chinook	208,899	289,771	80,872
Palliser	122,729	185,542	62,813
Headwaters	92,183	99,749	7,566
Calgary	536,317	696,836	160,519
Region 5	68,312	71,852	3,540
David Thompson	246,195	265,343	19,148
East Central	126,084	129,679	3,595
Westview	85,487	89,484	3,997
Crossroads	77,332	68,593	(8,739)
Capital	1,480,683	1,584,425	103,742
Aspen	96,330	109,856	13,526
Lakeland	194,772	200,038	5,266
Mistahia	168,015	228,206	60,191
Peace	51,554	60,432	8,878
Keeweetinok Lakes	46,969	49,196	2,227
Northern Lights	67,806	76,140	8,334
Northwestern	0	9,943	9,943
Total	**3,669,667**	**4,215,085**	**545,418**

Reporting Changes for 2001/2002

The following are the reporting changes for ambulatory care effective April 1, 2001:

1. **Registration Time** – It is mandatory to report Registration Time for emergency room and day surgery service recipients.
2. **Disposition Time** – It is mandatory to report Disposition Time for emergency room and day surgery service recipients.
3. **Provider Type** – It is mandatory to report at minimum the main service provider for emergency room and day surgery service recipients.

ACCS Reporting Contacts

Alberta Health & Wellness is fortunate to have two advisory groups to provide input into reporting and coding issues. These advisory groups include representatives from all Regional Health Authorities and should be considered as the first point of contact when reporting issues or questions arise. The two groups are:

- Provincial Ambulatory Care Advisory Group (PACAG)
- Health Record Advisory Committee (HRAC)

A listing of the members of each of these groups is included for your convenience and reference. Please consult these representatives on any issues that may arise. If the issue cannot be resolved at the Regional level, these representatives have the opportunity to bring the concern to the next meeting of the advisory group of which they are a member.

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Visit Definitions

Ambulatory Care Visit Definition (See Examples 1-13).
A visit is defined as an attendance at an ambulatory care functional centre during which primary service activities are provided to the service recipient and/or significant other(s) on behalf of the service recipient. If a service recipient receives services from more than one ambulatory care functional centre within a 24 hour period, than each attendance is counted as a separate visit.

Valid codes for clinical data reporting are 713 and some 714 and 715 codes in the Alberta MIS - Primary Chart of Accounts, (see Section 5). There are two exceptions to this guideline:

7112060	Employee Health (valid code for reporting ambulatory care activity)
7135099	Clinical Administration (invalid code for reporting ambulatory care activity)

Mental Health Service Recipient Definition (See Examples 14-16).
Mental Health Service Recipient (for the purposes of reporting mental health intervention information): is an individual who seeks the services offered by a psychiatric or psychological outpatient or community based program under hospital jurisdiction, and as such, psychological or psychiatric treatment is provided by members within the aforementioned programs.

Based on the recommendation of the Provincial Ambulatory Care Advisory Group, data reporting for all mental health service recipients who seek the services offered by a psychiatric or psychological outpatient or community based program will be based on individual **CONTACTS.**

A contact is defined as the occurrence of a face to face or technologically mediated interaction with a mental health service recipient in which the MAJOR intent is to provide psychological or psychiatric treatment.

WHO SHOULD USE MENTAL HEALTH INTERVENTION CODES: The mental health six digit intervention codes developed for ACCS are to be used when care is provided out of an organized mental health program to a mental health service recipient by a mental health service provider.

Visit Examples – Ambulatory Care

Ambulatory Care Visit Examples 1-13.

The following ambulatory visit examples apply to the reporting of data for the ACCS grouper.

1. Visit By A Service Recipient To Day/Night Care Area

The Day/Night Care area is identified with one ambulatory care functional center code that describes the care provided to the service recipient.

Example: *A service recipient has a carpal tunnel release performed in Day/Night Care.*

The functional center code is reported at the level the facility uses internally. Only one visit is reported.

INTENT: **For ACCS grouper reporting, the services received are not fragmented into operating room, recovery room and pre/post care, and only one visit is reported.**

2a. Multiple Visits By Same Service Recipient To Different Ambulatory Care Functional Centres

A service recipient may visit more than one ambulatory care service area within a 24 hour period. Separate visits must be reported for each area providing service recipient care.

Example (i): *A service recipient is seen in Emergency with a gastrointestinal bleed. Service recipient is transferred to Day/Night Care for an esophagogastroduodenoscopy.*

Report two visits; one for Emergency services and one for Endoscopy services.

Example (ii): *A service recipient is seen in the morning at the Ophthalmology Clinic for a cataract. The service recipient went home, but returned later in the day to Emergency after slipping on the sidewalk, and sustaining a fractured thumb.*

Report two visits; one for Ophthalmology services and one for Emergency services.

INTENT: **A service recipient may attend multiple ambulatory care service areas during a 24-hour period. A separate visit is reported for each attendance at a different service area.**

Visit Examples – Ambulatory Care

2b. Multiple Visits By Same Service Recipient To Same Ambulatory Care Service Area

A service recipient may visit the same ambulatory care service area more than once in a 24 hour period. Separate visits must be reported for each time an ambulatory care service area provides service recipient care.

Example (i): *An elderly service recipient is seen in Emergency at 0700 hours for lightheadedness due to acute viral infection. The same service recipient is seen in Emergency at 1000 hours for laceration sustained in a fall when the service recipient fainted.*

This service recipient is seen in Emergency twice within a 24 hour period. Report two visits.

Example(ii): *A service recipient was seen 4 times in a 24 hour period for IV therapy treatment.*

Report four visits.

INTENT: **A service recipient may visit the same ambulatory care service area more than once in a 24 hour period. A separate visit is reported for each time the functional centre provides service to the service recipient.**

Visit Examples – Ambulatory Care

3a. Same Service Recipient Seen By Multiple Service Providers In A Multidisciplinary Clinic (Identified As One Functional Centre)

When a service recipient is seen in a multidisciplinary clinic, separate visits are reported when the clinical services provided are diverse.

Example: *A service recipient is seen in a multidisciplinary Cardiac Rehabilitation Clinic. The service recipient is seen by a physician for assessment as well as by a physiotherapist and a clinical nutritionist.*

Report three ambulatory care visits.

INTENT: **Each contact in which clinical services provided are diverse should be reported as a visit in order to accurately reflect activity and allow for consistent data management.**

3b. Same Service Recipient Seen By Multiple Service Providers In One Ambulatory Care Service Area

Generally, only one visit is reported when a service recipient sees several health service providers during an attendance at an ambulatory care area such as Emergency or Day/Night Care. An exception to this is when service providers who are not routinely involved in the provision of service recipient care in that service area, do deliver service recipient care.

Example (i): *A service recipient is seen in Surgery clinic by a physician and nurse for assessment of uterine prolapse.*

Report one ambulatory care visit.

Example (ii): *A service recipient is seen in Emergency by an emergency physician, a nurse and a respiratory therapist for assessment and treatment of an asthma attack.*

Report two visits.

Example (iii): *A service recipient is seen in Emergency by a general practitioner and a psychologist for assessment and treatment of depression.*

Report two visits.

INTENT: **A visit to an ambulatory care service area may include contact with a number of service providers and generally only one visit is reported unless care is also provided by a health service provider not routinely involved in the provision of care in that area.**

Visit Examples – Ambulatory Care

4. Service Recipient Seen In Ambulatory Care Service Area And Admitted

When a service recipient visits an ambulatory care service area and is subsequently admitted, an ambulatory care visit is reported.

Example: *A service recipient is seen in Emergency with a diagnosis of myocardial infarction. The service recipient is then admitted to hospital.*

This is considered an ambulatory care visit.

INTENT: **If a service recipient visits an ambulatory care service area and is then admitted, a visit is reported for the ambulatory care service. The ACCS grouper recognizes unexpected admissions as a high resource element.**

5. Service Recipient Left Without Being Seen Or No Show

Although a "true" service is not provided, a visit is reported if a service recipient is registered but leaves prior to being seen. A visit is not reported if a service recipient fails to show for treatment.

Example (i): *A service recipient is registered in Emergency, however leaves prior to being seen.*

Although a "true" ambulatory care service is not provided, a visit is reported for management purposes, to indicate the number of service recipients leaving prior to being seen. Report a disposition of "9" (Left without being seen) for these scenarios.

Example (ii): *A service recipient is scheduled to visit the General Psychiatry Clinic, but fails to show.*

This is not considered an ambulatory care visit.

Example (iii): *A service recipient is seen in Emergency complaining of a severe headache and receives a comprehensive nursing examination, but leaves prior to seeing a physician.*

This is considered an ambulatory care visit.

INTENT: **The statistics of service recipients who leave without being seen or are no shows are important management information and provide critical information for quality assurance and service recipient satisfaction reviews. Cases reported with a disposition of "9" (Left without being seen) will not be used as a basis for funding. A visit is reported if the service recipient consumes resources in the ambulatory care service area.**

Visit Examples – Ambulatory Care

6. Service Recipient Referred In From Another Facility (Excluding Laboratory And Investigative Technology Services)

When an inpatient from another facility is seen at an ambulatory care functional center, a visit is reported. The delivery organization at which the service recipient is an inpatient must be identified (i.e. Institution From).

Example(i): *A service recipient is an inpatient at one acute care hospital. He/she is referred to the Oncology ambulatory care service area at another acute care hospital.*

This is considered an ambulatory care visit (at the ambulatory care service area of the second hospital).

Example(ii): *A service recipient is an inpatient at your own acute care facility. He/she is referred to the Rheumatology ambulatory care service area at your facility.*

This is not considered an ambulatory visit.

Workload associated with inpatients is captured under MIS for supporting inpatient costs. Inpatient funding "bundles" services provided for inpatients in all settings within the hospital during their stay.

Example(iii): *A service recipient is a resident at a nursing home (attached to an acute care facility). He/she is referred to Emergency ambulatory care service area at your facility.*

This is considered an ambulatory care visit.

INTENT: **Report a visit for an inpatient from another facility to identify the ambulatory care services provided. Do not report a visit to an ambulatory care service area for an inpatient from your acute care facility. The ACCS grouper reporting is intended to record purely ambulatory care visits.**

7. Visit By A Service Recipient To A Private Clinic Ambulatory Service Area

When a service recipient attends a private clinic ambulatory care service area, a visit is reported if hospital resources are consumed within the ambulatory care service area.

Example: *A service recipient is seen in Dr. Smith's private cardiac clinic at Regional Hospital. Dr. Smith does utilize hospital nursing resources to assist him in assessment and treatment of his service recipients. A record is completed for the visit.*

This is considered an ambulatory care visit.

INTENT: **A visit is reported if the visit consumes regional resources within the ambulatory care service. If the private clinic is self-funded, ambulatory care visits are not reported. It is assumed that AHCIP will be billed directly by the clinic.**

Coding Guidelines & Examples

Visit Examples – Ambulatory Care

8. Other Modes Of Contact - Telephone Visits, Videoconference Visits

Telephone/videoconference visits are considered to be reportable ambulatory care visits when they replace a face-to-face visit and are worthy of clinical documentation.

Example: *A service recipient is contacted by telephone to obtain pre-surgical information from staff in the Pre-Admission Clinic.*

Report one visit.

INTENT: **Report a telephone/videoconference call as an ambulatory care visit if clinical documentation occurs and all data elements including diagnosis can be completed, i.e. the telephone visit has replaced a face to face visit.**

9. Service Recipient Seen By Physician In Consultation

When a service recipient is seen by a physician in consultation, a visit is not reported for the assessment completed by the consultant.

Example: *A service recipient is seen in Emergency by an emergency physician for numbness in the left side of the body. A neurologist is called in to complete a consultation to assist in obtaining a definitive diagnosis.*

Report one visit.

INTENT: **Only the care provided by the emergency physician is reported. The consultation completed by the neurologist is not reported as a visit because the clinical services provided are not considered as diverse. Note that consultations completed by other service providers such as psychologists are reported as separate visits.**

10. Service Recipient Seen By Multiple Physicians

When a service recipient is seen by multiple physicians in the same clinic, only the care provided by the service recipient's registered physician is reported as a visit.

Example: *A service recipient has a diagnosis of lupus erythematosis and sees a rheumatologist and a dermatologist. The service recipient is registered under the rheumatologist.*

Report one visit.

INTENT: **A visit is reported only for the rheumatologist as this is the service recipient's registered physician. Other physician's care is not considered diverse.**

Visit Examples – Ambulatory Care

11. Lab Procedures

Laboratory Procedures are not required data elements for the ACCS grouper.

The ACCS grouper assumes the presence of laboratory services and the costs of these are "bundled" into the cells. Hence, clinics, emergencies and procedure rooms are not required to report laboratory tests ordered.

For the purposes of management and funding, Lab services will be bundled into the weights for inpatient and outpatient groupers.

Example: *Service recipient is seen in the Family Medicine clinic and receives orders for laboratory work and a chest x-ray. The clinic would report the chest x-ray but not the laboratory work as part of the data elements required for the ACCS grouper.*

12. Visits For Diagnostic Imaging Service Only (Discrete DI)

When a service recipient visits an ambulatory care service area and receives diagnostic imaging services only, an ambulatory care visit is reported.

Example (i): *A service recipient is seen in a physician's office and asked to go to the hospital to have a DI service performed.*

Report a visit when the DI service is performed using the standard ambulatory care minimum data set. Report Mode of Service category "9" – Discrete DI.

Example (ii): *A service recipient is seen in hospital A and referred to Hospital B for DI service.*

At Hospital A, report an ambulatory care visit. **Note:** Reporting the code for service is not required if the service recipient does not return to Hospital A.

At Hospital B, report a visit when the service is performed using the standard ambulatory care minimum data set. Report Mode of Service category "9" – Discrete DI.

Example (iii): *A service recipient is a patient in a long term care facility and is sent to a hospital's Diagnostic Imaging Department for a DI service.*

Report a visit when the DI service is performed using the standard ambulatory care minimum data set. Report Mode of Service category "9" – Discrete DI. **Note:** Reporting is the same regardless if the long term care facility is attached or is not attached to the hospital where the DI service is performed.

INTENT: Reporting visits for diagnostic imaging services results in a complete data set of ambulatory care diagnostic imaging activity being available for analysis and funding allocations.

Visit Examples – Ambulatory Care

13. Visits For Private Clinics

When a service recipient visits a private clinic for ambulatory care services, a visit is reported if the services provided are funded by the region.

Example (i): A service recipient is seen in a private rehabilitation clinic where services are provided for an injury covered by Workers' Compensation insurance.

A visit is not required to be reported, as regional dollars are not being used to cover the services provided. A visit may be reported by the private clinic if desired.

Example (ii): A service recipient is seen in a private physical therapy clinic for gait training post fracture. The services are covered through the region's funding received from Alberta Health and Wellness.

A visit is reported as regional dollars are used to cover the cost of the services provided.

INTENT: Only those visits seen in private clinics that are covered through regional funding are required to be reported. Reporting other service recipient activity is optional.

Visit Examples – Mental Health Care

Mental Health Care Visit Examples 14-16.

The following mental health visit examples apply to the reporting of data for the ACCS grouper.

14. Data Reported On A Contact Basis

Example: Service recipient diagnosed with schizophrenia is seen in Psychiatric Ambulatory Care Services by a psychologist for individual therapy and a psychiatric nurse for medication administration.

Report two visits on a contact basis.

INTENT: If a service recipient receives services offered by a psychiatric or psychological outpatient program under hospital jurisdiction, data is reported on a contact basis for each service provider.

Visit Examples – Mental Health Care

15. Data Reported On A Visit Basis

Example: *Service recipient is seen in the Emergency Department by Family Practitioner and nursing personnel. Diagnosis of depression is made and medication prescribed.*

Report one ambulatory care visit.

INTENT: **If a service recipient receives services outside of a psychiatric or psychological outpatient program under hospital jurisdiction, data is reported on a visit basis. This is considered an ambulatory care service recipient, not a mental health service recipient.**

16. Use Of Mental Health Intervention Codes

Example (i): *An occupational therapist provides treatment to a mental health service recipient out of an organized mental health program.*

This is considered as a mental health service recipient. The occupational therapist would use the six digit mental health intervention codes rather than the six digit rehabilitation intervention codes.

Example (ii): *A General Practitioner treats a service recipient diagnosed with depression in the Emergency Department.*

This is considered as a non mental health service recipient. The General Practitioner would not use the six digit mental health intervention codes.

INTENT: **A mental health service provider working out of a mental health program, attending a mental health service recipient, should use the six digit mental health intervention codes.**

Coding Guidelines - Diagnoses Coding

I. Use the most pertinent ICD-9-CM code(s) from 001.0 to V82.9 to identify diagnoses, signs, symptoms, conditions, complaints, problems, or other reasons for the ambulatory care service being provided.

A. The Health care providers should document the service recipient's condition using terminology which best describes the specific diagnoses, symptoms, problems, or reason for the service.

The most frequently-used codes to describe the reason for the service will be the codes 001.0 to 999.9 from the section of *ICD-9-CM* for the classification of diseases and injuries.

When an **established** or probable diagnosis is not documented, codes 780.0-799.9 that identify symptoms and signs (as opposed to diagnoses) from Chapter 16 of *ICD-9-CM*, Symptoms, Signs and Ill-defined Conditions, are used.

B. When circumstances other than a disease or injury are recorded as the reason for service, codes V01.0 to V82.9, Supplementary Classification of Factors Influencing Health Status and Contact with Health Services, are used. If known, coding the underlying condition requiring the service is encouraged.

Example (i):

Service recipient is seen for reprogramming of a cardiac pacemaker for Sick Sinus Syndrome.

Assign V53.31, Adjustment of cardiac pacemaker, first, then 427.81, Sick Sinus Syndrome, as a secondary diagnosis.

Example (ii):

Routine follow-up care following surgical intervention for change of dressings, checking wound healing process, or removal of sutures and no mention of infection or other complications.

Assign V58.3, Attention to surgical dressings and sutures.

Coding Guidelines - Diagnoses Coding

Example (iii):

Service recipient is seen for prophylactic vaccination for rubella.

Assign V04.3, Need for prophylactic vaccination, rubella alone.

Example (iv):

Service recipient is seen after the initial treatment of a fracture during the fracture-healing period.

Assign V54.8, Other orthopedic aftercare, first, then the 800 fracture code as the secondary diagnosis.

II. Code diagnoses documented as probable, or to be ruled out but not established, with a diagnosis prefix of "Q". (query diagnoses).

Example:

Service recipient is seen for headache at which time the physician notes a questionable right-sided weakness. A CT scan is ordered and physician documents "rule out brain tumor."

Assign Q239.6, Neoplasms of unspecified nature, brain. (Do not code right-sided weakness in this instance.)

Signs and symptoms that are followed by contrasting or comparative diagnoses should be coded so that a symptom is the Main Ambulatory Care Diagnosis. Code also all the contrasting diagnoses as suspected diagnoses.

Example:

Service recipient is seen for chest pain. The physician is unsure of the cause of the pain and documents " chest pain, due to either angina or esophageal spasm."

Assign 786.50, Chest pain, unspecified, first, then Q413.9, Other and unspecified angina pectoris, and Q530.5, Dyskinesia of esophagus, as secondary diagnoses.

Coding Guidelines - Diagnoses Coding

III. Code and report chronic diseases and conditions treated on an ongoing basis as many times as the service recipient receives related care.

Example:
Service recipient with rheumatoid arthritis is seen repeatedly in Rheumatology Clinic.

Assign 714.0, Rheumatoid arthritis regardless of the number of visits recorded.

IV. For ambulatory surgery, code the diagnosis for which the surgery was performed. If the postoperative diagnosis is different from the preoperative diagnosis, select the postoperative diagnosis for coding.

Example:

Service recipient with clinical assessment of appendicitis has appendectomy Results from surgery state a normal appendix.

Assign 789.0, Other symptoms involving abdomen and pelvis.

V. For service recipients receiving therapeutic services[1] only, the appropriate V code for the service is sequenced first. If documented, the diagnosis or problem previously established is coded as a secondary diagnosis.

Example (i):

Service recipient with obesity is seen for dietary counseling.

Assign V65.3, Dietary Surveillance and Counseling, first, then 278.00, Obesity, unspecified, as the secondary diagnosis.

Example (ii):

Cancer service recipient is seen solely for chemotherapy.

Assign V58.1, Chemotherapy, first, then code the malignancy second.

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[1] Therapeutic services include those services provided by Clinical Nutrition, Physical Therapy, Occupational Therapy, Social Work, etc.

Coding Guidelines - Diagnoses Coding

Example (iii):

Service recipient with chronic renal failure is seen solely for hemodialysis.

Assign V56.0, Extracorporeal dialysis, first, then 585, Chronic renal failure, as the secondary diagnosis.

Example (iv):

Service recipient is seen for physiotherapy after a current cruciate ligament tear.

Assign V57.1, Other physical therapy, first, then 844.2, Sprains and strains, cruciate ligament of knee, as the secondary diagnosis.

NOTE: The codes to be used as the main ambulatory care diagnosis for the rehabilitation disciplines are as follows:

Audiology	V721
Physical Therapy	V571
Occupational Therapy	V5721
Recreational Therapy	V5789
Speech Language Pathology	V573
Respiratory	V570

VI. **For service recipients receiving diagnostic services[2] only, the appropriate V code for the examination is sequenced first. If documented, the diagnosis or problem for which the services are being performed is sequenced second.**

Example:

Service recipient was referred to the hospital Diagnostic Imaging Department for an MRI of the head with the reason for the examination identified as query multiple sclerosis.

Assign V72.5, Radiological examination, not elsewhere classified, first then Q340, Multiple sclerosis, as the secondary diagnosis.

Note: All Discrete Diagnostic Imaging visits should have V72.5 reported as the main ambulatory care diagnosis.

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[2] Diagnostic services include diagnostic testing such as diagnostic imaging, exercise stress test, Holter monitor, ECG, EMG, pulmonary function test, etc.

Coding Guidelines - Diagnoses Coding

VII Use the V-codes from category V72.8, Other specified examinations, for service recipients receiving preoperative evaluations only, sequenced first.\

The code(s) for the condition describing the reason for the surgery and any findings from the evaluation are sequenced as secondary diagnoses.

Example:

Service recipient diagnosed with cholelithiasis is seen in Preoperative Assessment Clinic and a preoperative chest x-ray is ordered.

Assign V72.83, Other specified preoperative examination, first, then 574.20, Cholelithiasis, as the secondary diagnosis.

VIII. Code routine follow-up visits after completed treatment to category V67, Follow-up examinations. Assign the V-codes for history of the disease or status, if applicable, as secondary diagnoses.

Example:

Service recipient 3-years' post-mastectomy is seen for routine check.

Assign V67.0, Follow up examination following surgery, first, then V10.3, Personal history of malignant neoplasm, breast.

Coding Guidelines - Injury Coding

Current Injury

A newly diagnosed injury where intended initial intervention may or may not have commenced but has not yet been completed.

Aftercare

Care for service recipients who have already been treated for an injury and are receiving care to consolidate the treatment, to deal with residual states, or to prevent recurrence.

Follow-up

Surveillance only following completed treatment.

Late Effect

A current condition in the service recipient that is caused by a previous condition, illness or injury. The previous condition is no longer present.

Old/Non Current

Injury for which the initial intended treatment has been completed. Intended initial treatment can be medical or surgical and also can be a multi-stage process.

- **Determination of the correct category is based on the course of the treatment and is independent of time frames.**
- **Use of the terminology "follow-up" by physicians does not always indicate a follow-up code should be used.**
- **Often physicians will give a diagnosis of a current injury when the reason for the visit is aftercare or follow-up.**

Examples of Injury Coding

1. *Service recipient presents to the Emergency Department with a foreign body, eye. After assessment diagnosis of corneal abrasion is made, foreign body is removed and eye patch applied.*
   CODE AS CURRENT INJURY

   Service recipient presents to Emergency Department two days later for recheck. Patch is removed, eyedrops instilled and eye repatched.
   CODE AS AFTERCARE (treatment has not yet been completed)

Coding Guidelines - Injury Coding

Service recipient returns to Emergency Department the following day for reasessment. Patch is removed and abrasion is healing.
CODE AS FOLLOW-UP

2. *Service recipient presents to the Emergency Department with a foreign body, eye. After assessment diagnosis of corneal abrasion is made, foreign body is removed and eye patch applied.*
   CODE AS CURRENT INJURY

   Service recipient returns to Emergency Department the following day for reassessment. Patch is removed and rust ring is found. Eye is repatched.
   CODE AS LATE EFFECT (following late effect coding guidelines)

   Service recipient returns to Emergency Department the following day for reassessment. Patch is removed and abrasion is healing.
   CODE AS FOLLOW-UP

3. *Service recipient presents to the Emergency Department with a foreign body, eye. After assessment diagnosis of corneal abrasion is made, foreign body is removed and eye patch applied.*
   CODE AS CURRENT INJURY

   Service recipient presents two weeks later to the Emergency Department with foreign body sensation. Examination reveals retained intraocular foreign body which is then removed.
   CODE OLD/NON CURRENT INJURY

   Service recipient returns to Emergency Department the following day for reassessment. Patch is removed and abrasion is healing.
   CODE AS FOLLOW-UP

4. *Service recipient presents to Emergency Department with a knee injury following a skiing accident. On examination, diagnosed with a torn anterior cruciate ligament.*
   CODE AS CURRENT INJURY

   Service recipient is admitted as an inservice recipient and repair of ligament is performed. Four weeks later, service recipient attends orthopedic outservice recipient clinic for post-op check.
   CODE AS AFTERCARE

Coding Guidelines - Injury Coding

Two months following surgery, the brace is removed in the orthopedic outservice recipient clinic.
CODE AS AFTERCARE

Service recipient presents to clinic in two weeks for final assessment and no problems found.
CODE AS FOLLOW-UP

5. *Service recipient presents to the Emergency Department with a knee injury following a skiing accident. On examination, diagnosed with a torn anterior cruciate ligament. A Jones bandage is applied and service recipient is referred to family physician for follow-up*
CODE AS CURRENT INJURY

Eight months later, the service recipient is admitted to day surgery for repair of ligament.
CODE AS OLD/NON CURRENT INJURY

Coding Guidelines - Intervention Coding

Intervention Definition

Includes all therapeutic, (generally performed in an operating room), diagnostic and clinical interventions.

Fundamental Guidelines For Coding Interventions

1. Use the most pertinent *ICD-9-CM* code(s) from 00.01 to 99.99 and the ACCS developed interventions (see Section 2) to identify the interventions performed.
2. For data reporting purposes, interventions are sequenced in order of the most significant to least significant.
3. The intervention with the highest weight is the one ICD-9-CM code considered to be the most **significant** intervention performed during the service recipient's visit (the ACCS grouper will loop through interventions to determine the highest weighted intervention).
4. When two interventions are both considered to be most significant, select the intervention that relates to the Main Ambulatory Care Diagnosis as the most significant.
5. Additional interventions have been developed on a limited basis to supplement certain areas of ICD-9-CM. See Section 2.
6. Ten (10) interventions may be reported.

Example (i):
Service recipient admitted with a diagnosis of senile cataract; phacoemulsification of cataract and insertion of lens prosthesis was performed in the operating room.

Assign: 13.41, Phacoemulsification and aspiration of cataract
13.71, Insertion of intraocular lens prosthesis

Example (ii):
Service recipient admitted for menometrorrhagia and subsequent bilateral tubal ligation.

Assign: 69.09, Other dilation and curettage
66.32, Other bilateral ligation and division of fallopian tubes

Coding Guidelines - Intervention Coding

Example (iii):
Service recipient admitted for gastroscopy, but intervention was not carried out as service recipient required immediate admission following a severe allergic reaction.

Assign: 00.01, Operation abandoned before onset
44.13, Gastroscopy (with an intervention suffix of "8")

The following are the generic Investigative Technology ICD-9-CM codes that may be used for diagnostic imaging investigation.

(a) Chest x-ray is performed.

Assign: 87.44 – Routine Chest x-ray so described

(b) Other x-ray is performed.

Assign: 88.39 – X-ray, Other and Unspecified

(c) Ultrasound is performed

Assign: 88.79 – Other diagnostic ultrasound

(d) Mammogram is performed.

Assign: 87.37 – Other mammography

NOTE: As an alternative, the specific Investigative Technology ICD-9-CM codes in Section 3 may be assigned.

Mandatory Data Elements

1. PROVINCE CODE

MANDATORY

The province code number is a one digit code which identifies the province of the institution submitting Ambulatory Care abstracts.
The code for Alberta is 8.

2. DELIVERY ORGANIZATION

MANDATORY

The delivery organization is the business organization responsible for the provision of services to service recipients and is identified by a four digit, provincially assigned number. The first digit identifies the level of care provided by the organization; the last three digits identify the organization number. (Please see Section 6 for delivery organization specific numbers).

Example: *The reporting delivery organization number for General Hospital ambulatory care is 8150*

3. SUBMISSION PERIOD

MANDATORY

The submission period is a two digit number identifying the month that the visit was initiated in. Submission periods range from 01 to 12 with the first submission period referring to the first period of the fiscal reporting year, that is April.
Example (i): Submission Month = March Period = 12

FISCAL SUBMISSION PERIODS	
Month	**Period**
April	01
May	02
June	03
July	04
August	05
September	06
October	07
November	08
December	09
January	10
February	11
March	12

Example (ii): The service recipient visited Day/Night care on May 06.
Submission Period = 02

Example (iii): The service recipient visited and was registered in Day/Night care on June 30 at 1800 hours and was discharged on July 1 at 0800 hours
Submission Period = 03

4. SUBMISSION NUMBER

MANDATORY

The submission number identifies the number of each abstract (visit) within a submission period. The abstracts must be consecutively numbered within a submission period, beginning with abstract 000001 and not exceeding 999999.

Example : Abstract number 2
000002

5. SUBMISSION TYPE

MANDATORY

The one digit field identifies the type of data that is being submitted (on the abstract). There are three types of data submissions:

Legend

A	Add record.
C	Change record.
D	Delete record.

6. PERSONAL HEALTH NUMBER

MANDATORY

The Personal Health Number (PHN) is the service recipient's unique health care coverage number as assigned by the Provincial Government of Residence. This field is completed for all residents of Canada. The field may be 12 characters in length, and must be right justified.

There are two options for indicating that a PHN is not available:

Option One

A one-digit code of 0 is entered (right justified):

a. If a service recipient has forgotten his or her personal health number at home and the health number is not available.
b. If the service recipient is from a country other than Canada.

Option Two

A one-digit code of 0 or 1 is entered (right justified):

a. Enter 0 if a service recipient is from Alberta and does not have health insurance or if the PHN is not available.
b. Enter 1 if a service recipient is from out of province with an unavailable PHN, out of country, Federal government coverage (eg. RCMP), or there is no health insurance from the province of residence.

Example (i): J. Blackburn's PHN (Alberta)
___634571230

Example (ii): A. Peterson's PHN (Newfoundland)
987654321012

Example (iii): R. Johnson is an Alberta resident and forgot his PHN at home
___________0

Example (iv): P. Mathews is a Saskatchewan resident and does not have his PHN with him
___________1 (using option 2)

Mandatory Data Elements

The field length for each provincial health number is as follows:

Alberta	9 digit Personal Health Number
British Columbia	10 digit Personal Health Care Number
Manitoba	6 digit Manitoba Health Registration Number
New Brunswick	9 digit Medicare Number
Newfoundland	12 digit Medical Care Plan Number
Northwest Territories	7 digit Health Care Number
Nunavut	7 digit Health Care Number
Nova Scotia	10 digit Medical Insurance Number
Ontario	10 digit Health Care Number
Prince Edward Island	8 digit Health Care Number
Quebec	12 digit Health Care Number
Saskatchewan	9 digit Hospital Service Number
Yukon Territory	9 digit Health Care Number

7. RESPONSIBILITY FOR PAYMENT

MANDATORY

The payment code is a one digit code which identifies the responsibility for payment.

0 Provincial Government
- Residents of Alberta covered by Alberta Health Care Insurance Plan.

1 Federal Government
- Service recipients fully covered by the Federal Government of Canada. This applies to RCMP, Canadian Armed Forces, Inmates of Federal Penitentiaries, Veterans hospitalized for recognized service - related conditions.

2 Workers' Compensation Board
- Service recipients covered by the Workers' Compensation Board of Alberta or by any province/jurisdiction.

3 Insured Non-Residents of Alberta/Residents of Canada

- A non-resident of Alberta who is a resident of another province or territory of Canada, and whose payment is covered by another provincial plan. Also included are new residents of Alberta who are still covered by the hospitalization plan of the province or territory from which they came.

4 Non-Residents of Canada

- Non-Residents of Alberta who are also non-residents of Canada. Included are those persons who are present in Alberta as tourists, transients or visitors from other countries.

5 Uninsured Residents of Alberta

- Service recipients who are permanent residents of Alberta, but not covered under AHCIP because they opted out or failed to register.

6 Insured, Non-Provincial Responsibility

- Hospitalization is charged directly to an insured resident because the Provincial Plan deems the care provided is not hospital care recognized by the plan.

7 Uninsured Non-Residents of Alberta/Residents of Canada

- Non-resident of Alberta who is a resident of another province or territory of Canada and whose payment is not covered by another provincial plan.

9 Special Government Funded Program

- Service recipients whose care is charged in part or in whole to a special government program (e.g. Program Unit Funding – PUF, Student Health Initiative Partnership – SHIP)

8. POSTAL CODE

MANDATORY

The service recipient's postal code is a catchment number as assigned by Canada Post. Field is six characters in length, and alphanumeric.

1. For residents of the province of Alberta the postal code should be completed, unless the resident is identified as having no fixed address, and does not have a general delivery mailing address. The postal code is then captured as T1T 1T1.

2. If the postal code cannot be obtained (and the service recipient does have an address), the postal code is then captured as 08.

The following two-digit codes are used to identify the province of residence (right-justified).

Newfoundland	00
Prince Edward Island	01
Nova Scotia	02
New Brunswick	03
Quebec	04
Ontario	05
Manitoba	06
Saskatchewan	07
Alberta - use only if unable to obtain a postal code	08
British Columbia	09
Northwest Territories	10
Yukon	11
United States	12
Other Country	13
Nunavut	15

Example (i): The service recipient is a resident of Alberta but has no fixed address. His general mailing address is T9H 3E2.
The code assignment is T9H 3E2.

Example (ii): The service recipient is a resident of Alberta but has no fixed address and no mailing address.
The code assignment is T1T 1T1.

Example (iii): The service recipient is a visitor from Saskatchewan and cannot remember his postal code.
The code assignment is 07.

Example (iv): The service recipient is a resident of Alberta, however, for whatever reason, the postal code cannot be obtained.
The code assignment is 08.

9. BIRTH DATE

The service recipient's birth date identifies when the service recipient was born. Field is eight characters in length, and format is YYYYMMDD (year, month, day).

MANDATORY

1. If the year of birth is known but not the month and day, record the first day of the first month.
2. If no part of the birth date is known and no estimate of the age can be made, assign the proxy date of January 01, 1901.

Example (i): The service recipient was born on July 27, 1964.
1964 07 27

Example (ii): The service recipient was born in 1960. Month and day were unavailable.
1960 01 01

Example (iii): No part of the service recipient's birth date is available, and no age was estimated. 1901 01 01

10. GENDER

The gender is a one-digit code identified as follows:

MANDATORY

M	Male
F	Female
0	Other

11. INSTITUTION FROM

MANDATORY

The institution from number is used when a service recipient is transferred from an acute care facility (by ambulance) to another acute care facility for treatment or hospitalization. (Ambulances include all licensed ambulances, interfacility transfer service units and air ambulances having the capability of providing medical intervention to a service recipient en route to the destination).

The acute care facility number must be a four digit, provincially assigned number indicating the facility the service recipient was transferred from. This **does not include** transfer of a service recipient from inpatient to an ambulatory care service in your own facility. (Please see Section 6 for delivery organization numbers).

Example (i): The service recipient is transferred from General Hospital Emergency Department to Sunshine Hospital Endoscopy Day/Night care. Sunshine Hospital records the General Hospital's ambulatory care number as institution from.
General Hospital Ambulatory Care # - 8150

Example (ii): The service recipient is transferred from General Hospital Inpatient Unit to Regional Hospital's Cardiac Clinic. Regional Hospital records General Hospital's inpatient number as institution from.
General Hospital's Inpatient # - 0150

12. SERVICE VISIT DATE (DATE OF SERVICE)

MANDATORY

The visit date is the calendar date that a service recipient receives an ambulatory care service (year, month, day). In the case of service recipients seen multiple times (e.g. therapeutic specialties), the date the service recipient is seen is the visit date.

Example (i): The service recipient was registered in the Emergency Department at 2300 hours on June 30, 2000 and was assessed and treated at 0100 hours, July 1, 2000.
Visit date is 20000630

Example (ii): The service recipient was seen in Rehabilitation Services for treatment on consecutive days for a ten day period.
Each date the service recipient was seen is the visit date.

MANDATORY

13. PHYSICIAN NUMBER (may report a maximum of 5)

The Physician Number is the Personal Health Number (PHN) OR the region/facility assigned number of the physician responsible for the care and treatment of the service recipient at the ambulatory care service. The first Physician Number reported should be that of the physician considered the most responsible for the care of the service recipient, and is mandatory to report when the service recipient is seen by a physician. Reporting additional Physician Numbers, to a maximum of four, is optional.

If the service recipient is not seen by a physician, this field is left blank.

Example (i): Dr. Jones repaired Mr. Doe's hernia in Day/Night care. He is the physician responsible for Mr. Doe's care. His Physician number is 345678910.
Enter 345678910

Example (ii): Mr. MacDonald was seen in the Diabetic clinic by Nurse Jones who is responsible for his diabetic education. Mr. MacDonald was not seen by a physician.
The Physician Number is left blank.

MANDATORY

14. PROVIDER TYPES (5 Provider Types allowed for non-mental health service recipients)

The provider type is a four digit code which identifies providers responsible for providing a clinically relevant type of service during a visit. (See listing on following page).

Provider Type is mandatory to report for mental health, emergency room and day surgery service recipients and optional to report for all other service recipients. A maximum of five Provider Types may be reported for one ambulatory care visit for non-mental health service recipients.

Emergency room & day surgery visits– report at minimum the main service provider.

1. Include all multiple providers of the same profession.
2. The same provider should be recorded only once for a visit.
3. Exclude laboratory technicians.
4. Exclude clerk/secretarial support.
5. Exclude health service providers listed below if they are performing a support function.
6. The provider types in italics and bolded are the required providers to be reported for mental health service recipients.
7. Five provider types may be submitted to Alberta Health & Wellness.

Valid primary and secondary provider types are identified as follows:

3141	Audiologist	5221	Ophthalmic Photographer
9988*	Audiology Aide/Assistant	3235	Ophthalmic Technician
3235	Audiology Technician	3414	Orthopaedic Technician
3217	Cardiology Technician	3219	Orthotist
6473	Child Care Assistant	4154	Pastoral Care
4164	Child Care Program Planning Officer	3131	Pharmacist
4212	Child Care Worker	3112	***Physician***
4165	Child Health Care Program Planning Officer	3142	Physical Therapist
3122	Chiropractor	6631	Physiotherapy Aide/Assistant
3132	Clinical Dietitian	3123	Podiatrist
3223	Dental Technician	9990*	***Psychiatrist***
3113	Dentist	4151	***Psychologist***
9993*	Dialysis Assistant	4169	***Psychometrist***
9994*	Dialysis Technician	3215	Radiation Therapist/Radiological Technician
6631	Dietary Aide	3111	Radiologist
3219	Dietary Technician	9992*	***Recreational Aide/Assistant***
3218	EEG Technician	3144	***Recreational Therapist***
3234	Emergency Medical Technician	3152	***Registered Nurse***
9995*	EMG Technician	9989*	***Registered Psychiatric Nurse***
9996*	ENG Technician	9991*	Resident
9985*	Kenesiologist	9987*	Respiratory Aide/Assistant
3413	Licensed Practical Nurse	3214	Respiratory Technician
9997*	Medical Student	3214	Respiratory Therapist
4212	***Mental Health Therapist***	4152	***Social Worker***
9984	Nursing Practitioner	3216	Sonographer
9999*	Other	9986*	Speech-Language Aide/Assistant
3143	***Occupational Therapist***	3141	Speech-Language Pathologist
6631	***Occupational Therapy Aide/Assistant***	9998*	Student (other than medical)

* Additional codes created where provider type not defined in national list.

NOTE: Some occupational titles classified within the same unit group are assigned the same numbers.
Example: Respiratory Technician: 3214; Respiratory Therapist: 3214

15. MIS PRIMARY CODE

MANDATORY

The MIS Primary code is a five to nine digit code which identifies the functional centre of each ambulatory care service event and/or relevant therapeutic functional centre for each ambulatory care therapeutic service event. Valid MIS Primary codes are 7112060 (Employee Health), 713, and some 714 and 715 codes under the Alberta MIS - Primary Chart of Accounts. MIS Primary codes must be left justified. (See Section 5 in this manual for valid MIS Primary codes).

Example (i): *A service recipient attends Emergency for a sprained ankle where he is assessed by a physician and a nurse. A physical therapist is called to Emergency to provide crutch walking training.*
Two ambulatory care visits are reported; one under the Emergency MIS Primary Code 71310 (for the physician/nurse services) and one under the Physiotherapy MIS Primary Code 71450 (for the physical therapist services).

Example (ii): *A service recipient attends Emergency for a sprained ankle where he is assessed by a physician and a nurse. The service recipient then goes to the Physiotherapy area where a physical therapist provides crutch walking training.*
Two ambulatory care visits are reported; one under the Emergency MIS Primary Code 71310 (for the physician/nurse services) and one under the Physiotherapy MIS Primary Code 71450 (for the physical therapist services).

Example (iii): *A service recipient attends a Cardiac Clinic for consultation with a specialist. The Cardiac Clinic is located in the Emergency Department.*
One ambulatory care visit is reported under the Cardiac Clinic MIS Primary Code 7135020.

16. MODE OF SERVICE

MANDATORY

Mode of service is a one digit code which identifies the manner in which an ambulatory care service was provided to a service recipient. Please note that categories 1 through 7 and 9 refer to individually registered service recipients.

1 Service is face-to-face with a service recipient and a regional service provider at a regional health service site.

2 Service is face-to-face with a group of service recipients and a regional service provider at a regional health service site.

Mandatory Data Elements

3 Telephone/electronic communication service with a service recipient and a regional service provider which takes the place of face-to-face service and is worthy of clinical documentation.

4 Videoconference service with a service recipient and a regional service provider which takes the place of a face-to-face service and is worthy of clinical documentation.

5 Service with a service recipient and a regional service provider at the service recipient's home.

6 Service with a service recipient and a regional service provider at a location out of the region.

7 Service with a service recipient and a regional service provider at a regional non-health service site (eg. school, business setting).

8 Service is with a non-individually registered service recipient(s) and a regional service provider (Stakeholder Type 2).

9 Service is with a service recipient receiving discrete diagnostic imaging investigation.

NOTES: An ambulatory care visit must be reported for each mode of service provided to a service recipient.

In the event that a category is not available to reflect both mode of service and location of service accurately, choose the category that reflects the location of service.

Example : A service recipient meets face-to-face with a social worker and then receives services as part of a group.
Two ambulatory care visits are reported; one with Mode of Service (1) recorded, and the other with Mode of Service (2) recorded.

17. DISPOSITION

MANDATORY

The disposition is a one digit code which identifies the service recipient's type of separation from the ambulatory care service.

1 Discharged - visit concluded.
2 Discharged from program or clinic - will not return for further care. (This refers only to the last visit of a service recipient discharged from a treatment program at which he/she has been seen for repeat services).
3 Left against medical advice.
4 Service recipient admitted as an inpatient to Critical Care Unit or OR in own facility.
5 Service recipient admitted as an inpatient to other area in own facility.
6 Service recipient transferred to another acute care facility (includes psychiatric, rehab, oncology and pediatric facilities).
7 DAA - Service recipient expired in ambulatory care service.
8 DOA - Service recipient dead on arrival to ambulatory care service.
9 Left without being seen. (Not seen by a care provider).

18. DIAGNOSIS PREFIX (may report a maximum of 6)

MANDATORY

An alpha prefix of "Q" may be added to further distinguish diagnoses as questionable or query diagnoses as appropriate.

19. MAIN AMBULATORY CARE DIAGNOSIS

MANDATORY

Diagnoses are reported using ICD-9-CM codes.

1. The main ambulatory care diagnosis is the diagnosis, condition, problem, or in some cases, intervention that is the main reason for the ambulatory care services being provided to the service recipient.
2. The main ambulatory care diagnosis is medically assigned unless a physician has not been involved with the management and care of the service recipient. In instances where the diagnosis is not medically assigned, the main ambulatory care diagnosis may be assigned by the health care provider chiefly responsible for the care and treatment of the service recipient.
3. When multiple diagnoses are considered the main reason for the ambulatory care services being provided, the main ambulatory care diagnosis is the diagnosis responsible for the greatest use of resources.

See the Diagnoses Coding Guidelines on page 21 for more detail on coding the main ambulatory care diagnosis.

20. SECONDARY DIAGNOSES (may report a maxium of 5)

MANDATORY

Diagnoses are reported using ICD-9-CM codes.

1. Secondary diagnoses are conditions or problems which influence a service recipient's need for treatment, care, or health status and co-exist at the time of service.
2. Sequence secondary diagnoses based on their impact on the ambulatory care service being provided.

See the Diagnoses Coding Guidelines on page 21 for more detail on coding diagnoses.

21. E-CODES (may report a maximum of 4)

MANDATORY

The associated External Cause of Injury and Place of Occurrence (E-codes) if the main ambulatory care diagnosis or secondary diagnoses are between the range of 800 to 999, Injury and Poisoning.

The associated external cause of injury/poisoning (E-code) is mandatory to report for service recipients being treated for a newly diagnosed condition reported with a code in the 800.0-999.9 range. Reporting E-Codes for other ambulatory care service recipients is optional.

Recording Place of Occurrence is also mandatory to report when an external cause of injury/poisoning E-code in ranges E850-E869 and E880-E928 is assigned.

Example (i): *The service recipient sustained injuries from a fall from a horse on a farm. Code E828.2 Accident involving animal being ridden*

Example (ii): *The service recipient sustained a fracture from falling downstairs at home. Code E880.9 Fall on or from other stairs or steps and E849.0 Place of occurrence – Home*

22. ANESTHETIC TYPE

MANDATORY

The anesthetic type is a one digit code which identifies the anesthetic type used for interventions. The anesthetic types are identified as:

1 General
2 Conscious Sedation
3 Spinal/Epidural
4 Regional Block (includes retrobulbar)
5 Local Infiltration (in O.R.)
6 Local Infiltration (includes local topical - not in O.R.)
7 Other

In the event that there is more than one anesthetic type used during a visit, only one anesthetic type is reported as per the following hierarchy: - General anesthetic will take precedence over any other anesthetic type, then conscious sedation, spinal/epidural, regional block, local infiltration (in O.R.), local infiltration (not in O.R.) and other, in that order.

23. MAIN INTERVENTION

MANDATORY

The intervention performed and considered by the provider(s) to be the most clinically significant. The valid entries must be derived from the ICD-9-CM or ACCS list of interventions. See Sections 2 and 3 for lists of interventions.

See the Intervention Coding Guidelines on Page 29 for more details on coding interventions.

24. OTHER INTERVENTIONS (may report a maximum of 9)

MANDATORY

Additional intervention codes, performed during a service recipient's visit. See Sections 2 and 3 for lists of interventions.

See the Intervention Coding Guidelines on Page 29 for more details on coding other interventions.

25. INTERVENTION SUFFIX (may report a maximum of 10)

MANDATORY

The intervention suffix can be used to further specify an intervention with a one digit expansion code in the range of 0-9, A-V or blank.

Suffix	Standardized Definition
A-V, 1-3 & 7	available for service recipient specific designations
4	interventions performed by scope when the approach or method is not included in the code title
5	interventions performed by laser technique when the technique is not indicated in the code title or inclusions
6	interventions performed by a combination of scope and laser when the techniques are not indicated in the code title or inclusions
8	"canceled surgery" - this suffix is used with another intervention code in addition to 00.01 and 00.02 to identify the specific intervention that was canceled. Suffix 8 cannot be used with the main intervention
9	"previous surgery" - this suffix is used to indicate surgery that the service recipient had prior to this admission
0	"intervention performed out of hospital" - this suffix is used to record interventions performed on the service recipient during this admission but outside of the reporting hospital.

26. REGISTRATION TIME

MANDATORY

The time (in hours/minutes) that the service recipient was registered at the facility on the day the ambulatory care service was provided. The hour is to be recorded using the 24 hour metric clock.

Example : *The service recipient was registered in day surgery at 1145 hours. Enter 1145.*

27. DISPOSITION TIME

MANDATORY

The time (in hours/minutes) at which the service provider discharges the service recipient from the ambulatory care service. (The service recipient is now free to leave the service area.) The hour is to be recorded using the 24 hour metric clock.

NOTE: For service recipients who expire in ambulatory care services, report the disposition time as the time the service recipient is pronounced deceased. For service recipients dead on arrival to an ambulatory care service, report the disposition time as the time the service recipient was registered.

Example : *The service recipient was discharged at 1515 hours. Enter 1515.*

28. DATE VISIT COMPLETED

OPTIONAL

The calendar date in year, month and day order, when the service recipient completed the current visit.

Example (i): *The service recipient is registered in Day Surgery on June 5, 2000 and following surgery returns home the same day.*
Enter 20000605

Example (ii): *The service recipient is registered in Day Surgery on June 5, 2000 at 2000 hours and returns home at 0600 hours June 6, 2000.*
Enter 20000606

29. TRIAGE LEVEL

OPTIONAL

The level of triage for the service recipient for this visit. The triage level was developed by the Canadian Association of Emergency Physicians and is applicable to ONLY those service recipients seen in an Emergency Department.

LEGEND	
TRIAGE LEVEL	**LEVEL OF ILLNESS/ACUITY**
1	Resuscitation
2	Emergency
3	Urgent
4	Semi-Urgent
5	Non-Urgent
9	Unavailable

Example : *The service recipient presents to Emergency with seizures. He is alert on arrival.*
The triage level is 3, urgent.

Optional Data Elements

Emergency Triage and Acuity Scale

Triage Level	Level of Illness/ Acuity	Time to Physician	Usual Presentation	Sentinel Diagnosis
1	Resuscitation	Immediate	Code/Arrest Major Trauma Shock States Near Death Asthma Severe Respiratory Distress Unconscious Seizures	Traumatic Shock Pneumothorax - Traumatic/ Tension Facial Burns with Airway Compromise Severe Burns >30% TBS Overdose with Hypotension/Unconscious AAA AMI with Complications/ CHF/ Low BP Status Asthmaticus Head Injury - Major/ Unconscious Status Epilepticus

Optional Data Elements

Triage Level	Level of Illness/ Acuity	Time to Physician	Usual Presentation	Sentinel Diagnosis
2	Emergency	Minutes (<15 Min)	Head Injury with Altered Mental State Severe Trauma Chemical Exposure - Eyes Chest Pain - Visceral (± Assoc. Symptoms) Overdose (conscious) ABD Pain (Age >50) with Visceral Symptoms GI Bleed with Abnormal Vital Signs CVA with Major Deficit Asthma Severe (PEFR<40%) Moderate/ Severe Dyspnea/ Difficulty Breathing Vaginal Bleeding Acute (Pain scale >5± Abn Vital Signs) Fever (Age ó 3 months) Temp ò 39.5 Acute Psychotic Episode / Extreme Agitation Diabetic Hypoglycemia, Hyperglycemia Headache Keratitis Pain Scale 8 - 10/ 10	Head Injury Trauma, Multiple Sites Multiple Rib Fracture Neck Injury/ Spinal Cord Alkaline/ Caustic Occular Burns AMI, Unstable Angina, CHF Chest Pain NOS Gastroesophageal Reflux Unspecified Drug/ Medicinal Overdose AAA Appendicitis Gastrointestinal Bleed/ Hypotension CVA Severe Asthma/ COPD Croup Spontaneous Abortion Ectopic Pregnancy/ Rupture Epiglottitis, Meningitis, Sepsis Acute Psychotic Episode/ Agitation Diabetic Ketoacidosis Hypoglycemia/ Hyperglycemia Migraine, Renal Colic Keratitis

Optional Data Elements

Triage Level	Level of Illness/ Acuity	Time to Physician	Usual Presentation	Sentinel Diagnosis
3	Urgent	<30 Min	Head Injury, Alert, Vomiting	Head Injury
			Moderate Trauma	Anterior Dislocated Shoulder Tibia/ Fibula Fracture Bimalleolar, Trimalleolar Ankle Fracture
			Signs of Serious Infection	Pyelonephritis/ Sepsis
			Mild/ Moderate Asthma (PEFR >40%)	Asthma without Status/ COPD
			Mild/ Moderate Dyspnea	Bronchiolitis/ Croup Pneumonia
			Chest Pain, No Visceral Symptoms, Age >30	Chest Pain NOS (Msk,GI,Resp)
			GI Bleed with Normal Vital Signs	GI Bleed, No complications
			Vaginal Bleeding Acute, Normal Vital Signs	Spontaneous Abortion
			Seizure, Alert on Arrival	Seizure
			Acute Psychosis ± Suicidal Ideation	Acute Psychosis ± Suicidal Ideation
			Pain scale 8 - 10/10 with minor injuries	LBP/ Strain (Disc)
4	Semi-Urgent	<1 Hour	Head Injury, Alert, No Vomiting	Head Injury, Alert, No vomiting
			Minor Trauma	Colles Fracture Ankle Sprain
			ABD Pain (Acute)	Appendicitis Cholecystitis
			Headache	Migraine
			Earache	Otitis Media/ Otitis External
			Chest Pain, No Visceral Symptoms, Age <30	Gastroesophageal Reflux
			Suicidal Ideation/ Depression	Suicidal Ideation/ Depression
			Corneal Foreign Body	Corneal Foreign Body
			Pain Scale 4 - 7	

Optional Data Elements

Triage Level	Level of Illness/ Acuity	Time to Physician	Usual Presentation	Sentinel Diagnosis
5	Non-Urgent	<2 Hours	Minor Trauma, Not Necessarily Acute	LBP/ Strain
			Sore Throat, No Resp Symptoms	URI
			Diarrhea	Gastroenteritis
			Vomiting, Normal Mental State	Vomiting
			Menses	Disorders of Menstruation
			Minor Symptoms	Dressing Changes/Cast Changes
			Psychiatric complaints	Symptoms/ Neurotic, personality and Non-psychotic Mental Disorders
			Pain Scale <4	Unspecified Superficial Laceration(s)

30. RESIDENCE NAME

OPTIONAL

The service recipient's residence is identified as the name of the place of residence where the service recipient lives. The first seven letters of the name of the residence are recorded. The field is seven characters in length and left justified. Special circumstances are listed immediately below. Places which must be abbreviated are identified on the following page.

If the name is shorter than seven letters, left justify the entry.

All blanks and periods are to be **ignored**.
Example (i): High Level = HIGHLEV Cold Lake = COLDLAK St. Paul = STPAUL

Apostrophes are to be **included** as one of the seven letters in the residence name
Example (ii): John D'Or Prairie = JOHND'O O'Chiese = O'CHIES

Street addresses, box numbers, RR, etc., are to be **excluded** from the residence name.

Non-resident of Alberta, but a resident of Canada, code the province or territory name only, left justified.
Example (iii): Regina, Saskatchewan = SASK or SK

Non-resident of Canada, but American resident, code as US or USA only, left justified.
Example (iv): Los Angeles, California = USA or US Dallas, Texas = USA or US

Non-resident of Canada, but resident of a country other than the USA, code as OTHER, left justified.
Example (v): Paris, France = OTHER London, England = OTHER

The following residence names must be abbreviated:

RESIDENCE	ABBREVIATION
Fort	FT
Fort Macleod	FTMACLE
Grande	GR
Grande Cache	GRCACHE
Buffalo Head Prairie	BUFFHEA
Buffalo Lake	BUFFLAK
Chinook Valley	CHINVAL
Edmonton Beach	EDMBEAC

Optional Data Elements

For the major centers listed below and non-residents, the following abbreviations may be used at the discretion of the reporting facility:

RESIDENCE	ABBREVIATION
Edmonton	EDM
Calgary	CALG
Medicine Hat	MEDHAT
Grande Prairie	GRPR
Lethbridge	LETH
Fort Saskatchewan	FTSASK
Rocky Mountain House	ROCKYMT or ROCKY
British Columbia	BC
Saskatchewan	SASK or SK
Manitoba	MAN or MB
Ontario	ONT or ON
Quebec	QUE or PQ
New Brunswick	NB
Nova Scotia	NS
Prince Edward Island	PEI or PE
Newfoundland	NFLD or NF
Northwest Territories	NWT or NT
Yukon Territory	YT
Nunavut Territory	NUNT
United States	US or USA
Other Countries	OTHER
Unspecified Non-resident	NONRES

31. DOCTOR TYPE (may report a maximum of 5)

OPTIONAL

The Doctor Type describes the role of the physicians associated with the service recipient in any capacity.

Type	Title	Definition
M	Main Physician Responsible	this is the attending physician most responsible for the care of the service recipient.
3	Other Responsible Doctor	a physician who has assumed responsibility for the care of the service recipient but who would not be considered the main physician responsible.
4	Consultant	a physician who is requested to provide advice and or treatment regarding the service recipient's condition.
5	Resident	a physician in training including interns.
7	Optional	as determined by the facility.

32. DOCTOR SERVICES (may report a maximum of 5)

OPTIONAL

The Doctor Service reflects the level of training or the specialty of the physician. The service must always be accompanied by a doctor number; they are considered a pair and it is not appropriate to report a service without the corresponding doctor number.

Optional Data Elements

DOCTOR SERVICE NUMBERS

	Physician Specialty		Physician Specialty		Physician Specialty
00000	Physician Group	00037	Vascular Surgery	00074	Medical Oncology
00001	Family Practice	00038		00075	Radiation Oncology
00002	Community Medicine/ Public Health	00039	Urology	00076	Gynecological Oncology
00003	Emergency Medicine	00040	Pediatric Surgery	00077	General Pathology
00004		00041		00078	Medical Microbiology
00005		00042		00079	
00006	Residency	00043		00080	Diagnostic Radiology
00007	General Practice	00044		00081	
00008		00045		00082	Medical Genetics
00009		00046		00083	Anatomical Pathology
00010	Internal Medicine	00047		00084	
00011	Clinical Immunology and Allergy	00048		00085	Hematology. Pathology
00012	Cardiology	00049		00086	Neuropathology
00013	Dermatology	00050	Obstetrics/ Gynecology	00087	Dentistry
00014	Endocrinology & Metabolism	00051	Gyne-Repro. Endocrinology & Infertility	00088	
00015	Gastroenterology	00052	Midwifery	00089	Nuclear Medicine
00016	Nephrology	00053		00090	Medical Biochemistry
00017	Neurology	00054	Maternal-Fetal Medicine	00091	Podiatry
00018	Respiratory Medicine	00055	Critical Care Med.	00092	
00019	Rheumatology	00056	Clinical Pharmacology	00093	
00020	Pediatrician	00057	Anesthesia	00094	
00021	Pediatric Clinical Immunology & Allergy	00058		00095	
00022	Pediatric Cardiology	00059		00096	Infectious Diseases
00023		00060	Otolaryngology	00097	Neonatal-Perinatal Med.
00024	Pediatric Endocrinology & Metabolism	00061		00098	
00025	Pediatric Gastro-Enterology	00062	Ophthalmology	00099	
00026	Pediatric Nephrology	00063			
00027		00064	Psychiatry		
00028	Pediatric Respirology	00065			
00029		00066	Hematology		
00030	General Surgery	00067	Pediatric Hematology		
00031	Cardiac Surgery	00068	Clinical Immunology		
00032	Neurosurgery	00069			
00033	Oral Surgery	00070	Physical Medicine & Rehabilitation		
00034	Orthopedic Surgery	00071			
00035	Plastic Surgery	00072	Medical Geriatrics		
00036	Thoracic Surgery	00073			

Optional Data Elements

33. CHART NUMBER

OPTIONAL

The chart number is the service recipient's unique identification number as assigned by the delivery organization. The fields must be right justified. The field is alphanumeric and may be 12 characters in length.

Example (i): Chart Number 234567891098

Example (ii): Chart Number ABC1234

34. STAKEHOLDER TYPE

OPTIONAL

The Stakeholder Type identifies whether the service recipient is a person or an organization.

1 A person is a registered service recipient receiving a service for which all applicable mandatory data elements are reported.

2 An organization is a group of non-registered service recipients receiving a service for which the following applicable mandatory data elements are reported:

- Province Code
- Delivery Organization
- Submission Period
- Submission Number
- Submission Type
- Service Event Date
- Provider Types (mandatory for mental health service recipients)
- MIS Primary Code
- Mode of Service
- Main Ambulatory Care Diagnosis
- Secondary Diagnoses
- Main Intervention
- Other Interventions

Example (i): A registered service recipient attends a Physical Therapy clinic.
The Stakeholder Type is 1.

Example (ii): A clinical nutritionist presents a health education session at a school. The students are not registered service recipients.
The Stakeholder Type is 2.

35. REFERRAL SOURCE

OPTIONAL

The referral source identifies the type of person or agency making the referral resulting in service recipient contact being initiated with a service provider.

0 No referral

1 Acute care facility including tertiary care and community health care facilities

2 Continuing care facility including extended care and nursing home facilities

3 Other health care service providers (funded by regional resources)

4 Home care

5 Services funded by non-regional resources (e.g. federal government, WCB)

6 Physician

7 Public health

8 Other individual/agency (e.g. private organizations)

9 Significant other

10 Educational institution

11 Self

12 Unknown

Example (i): A service recipient is treated in emergency following a motor vehicle accident.
The Referral Source is 0.

Example (ii): A service recipient is treated in the Physical Therapy Department upon referral of her physician.
The Referral Source is 6.

Optional Data Elements

36. REFERRED-TO AGENCY

OPTIONAL

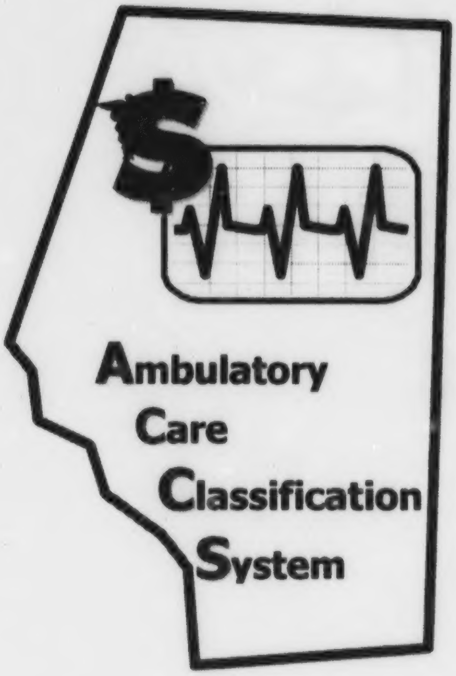
The referred-to agency identifies the type of person or agency to which a service recipient is referred to by a service provider.

0	No referral
1	Acute care facility including tertiary care and community health care facilities
2	Continuing care facility including extended care and nursing home facilities
3	Other health care service providers (funded by regional resources)
4	Home care
5	Services funded by non-regional resources (e.g. federal government, WCB)
6	Physician
7	Public health
8	Other individual/agency (e.g. private organizations)
9	Community mental health or Psychiatric Facility

Example (i): A service recipient has been treated in emergency and is sent home.
The Referred-To Agency is 0.

Example (ii): Upon completion of occupational therapy treatment, a service recipient is referred to Home Care.
The Referred-To Agency is 4.

Alberta
HEALTH AND WELLNESS


Ambulatory
Care
Classification
System

1. LIST OF ACCS GROUPER CELLS

Effective April 2000

List of ACCS Grouper Cells

ACCS #	ACCS Name	Intervention Group
1.1	Nerve & Other, Local Anaesthetic	✔
1.2	Nerve & Other, General Anaesthetic	✔
1.3	Nerve & Other, Other Anaesthetic	✔
1.4	Nerve & Other, No Anaesthetic	✔
2	Spinal	✔
3	Nerve Injection	✔
4	Orbital & Other Eye	✔
5	Lens Interventions	✔
6	Iris & Other Eye	✔
7	Strabismus	✔
8	External Eye	✔
9	Bronch/Pharynx	✔
10	Tympanoplasty	✔
11	Sinus Interventions	✔
12	Other Sinus	✔
13	Tonsils & Adenoids 12+ years	✔
13.1	Tonsils & Adenoids 0 < 6 years	✔
13.2	Tonsils & Adenoids 6 < 12 years	✔
14	Nasal Interventions	✔
15	Other Respiratory	✔
16	External Ear 18 + years	✔
16.1	External Ear 0 < 1.5 years	✔
16.2	External Ear 1.5 < 6 years	✔
16.3	External Ear 6 < 12 years	✔
16.4	External Ear 12 < 18 years	✔
17	Respiratory Endoscopy - ENT	✔
18	Pacemaker Implant	✔
19	Cardiac Catheter 18 + years	✔
19.1	Cardiac Catheter 0 < 6 years	✔
19.2	Cardiac Catheter 6 < 18 years	✔
20	Angiography 18 + years	✔
20.1	Angiography 0 < 6 years	✔
20.2	Angiography 6 < 12 years	✔

ACCS #	ACCS Name	Intervention Group
20.3	Angiography 12 < 18 years	✔
21	Vascular Interventions 18 + years	✔
21.1	Vascular Interventions 0 < 18 years	✔
22	Other Vascular Interventions	✔
23.1	Lymphatic Interventions, Local Anaesthetic	✔
23.2	Lymphatic Interventions, General Anaesthetic	✔
23.3	Lymphatic Interventions, Other Anaesthetic	✔
23.4	Lymphatic Interventions, No Anaesthetic	✔
24	Minor Vascular	✔
25	Cholecystectomy	✔
26	Hernia	✔
27	ERCP	✔
28.1	Endoscopy GI - Low	✔
28.2	Endoscopy GI - Medium	✔
28.3	Endoscopy GI - High	✔
29.1	Ano-Rectal Interventions, Local Anaesthetic	✔
29.2	Ano-Rectal Interventions, General Anaesthetic	✔
29.3	Ano-Rectal Interventions, Other Anaesthetic	✔
29.4	Ano-Rectal Interventions, No Anaesthetic	✔
30.1	Minor Anal Interventions, Local Anaesthetic	✔
30.2	Minor Anal Interventions, General Anaesthetic	✔
30.3	Minor Anal Interventions, Other Anaesthetic	✔
30.4	Minor Anal Interventions, No Anaesthetic	✔
31	Mechanical Implants	✔
32	Lithotripsy	✔
33	Upper Urinary Interventions	✔
34.1	Lower Uri & Genital	✔
34.2	Reconstruction, Vas Deferens	✔
35.1	Bladder & Urethral Interventions, Local Anaesthetic	✔
35.2	Bladder & Urethral Interventions, General Anaesthetic	✔
35.3	Bladder & Urethral Interventions, Other Anaesthetic	✔
35.4	Bladder & Urethral Interventions, No Anaesthetic	✔
36.1	Vasectomy	✔
36.2	Other Male Genital Interventions	✔
37	Circumcision 18 + years	✔
37.1	Circumcision 0 < 1.5 years	✔
37.2	Circumcision 1.5 < 6 years	✔

ACCS #	ACCS Name	Intervention Group
37.3	Circumcision 6 < 12 years	✓
37.4	Circumcision 12 < 18 years	✓
38	Uro Diagnostic Interventions	✓
39	Uterus & Adnexal Intervention	✓
40	Endo & Gyn Interventions	✓
41	Minor Gyn Interventions	✓
42	Evacuations	✓
43	Maxillo-Facial	✓
44	Chest Wall Interventions	✓
45.1	Upper Extremity Interventions	✓
45.2	Shoulder Interventions	✓
46	Open Reductions	✓
47	Tendon & Muscle Interventions	✓
48	Closed Reductions	✓
49	Lower Extremity	✓
50	Knee Interventions	✓
51	Ankle & Foot	✓
52.1	Remove Int Fixation, Lower Extremity	✓
52.2	Other Removal, Int Fixation	✓
53	Soft Tissue Interventions	✓
54	Manipulations	✓
55	Mastectomy	✓
56.1	Augment/Reduc Breast Bilateral	✓
56.2	Augment/Reduc Breast Unilateral	✓
57	Breast Plastic Interventions	✓
58.1	Ear & Cleft Lip Reconstruction	✓
58.2	Face Rhytidectomy	✓
58.3	Other Plastic Reconstruction	✓
59.1	Skin Interventions, Local Anaesthetic	✓
59.2	Skin Interventions, General Anaesthetic	✓
59.3	Skin Interventions, Other Anaesthetic	✓
59.4	Skin Interventions, No Anaesthetic	✓
60	Dental Surgery	✓
61.1	Biopsy, Other	✓
61.2	Biopsy, Percutaneous	✓
62	Hemodialysis	✓
62.1	Home Hemodialysis Teaching	✓

ACCS #	ACCS Name	Intervention Group
62.2	Selfcare Hemodialysis	✓
63	Transfusions	✓
64	Cardioversion	✓
65	Chemotherapy -- Oncology	✓
66	Myelogram	✓
68	Thyroid Interventions	✓
69	Parotid Duct Interventions	✓
70	Appendectomy	✓
71	Gastro-Intestinal Related Interventions	✓
72	Peritoneal Dialysis	✓
72.1	Home Peritoneal Dialysis Teaching	✓
73	Diagnostic Investigation of Vascular System	✓
74	Nuclear Imaging	✓
75	CAT Scan	✓
76	MRI	✓
77	Radiotherapy	✓
78	Chest Xray	✓
79	Other Xray	✓
80	Mammogram	✓
81	Ultrasound	✓
82.1	Extensive Sleep Studies	✓
82.2	Other Sleep Labs	✓

ACCS #	ACCS Name	Clinical Group
201	Diag Inv General Cardiac 0 < 12 years	Cardiac
203	Diag Inv General Cardiac 12 < 18 years	Cardiac
205	Diag Inv General Cardiac 18+ years	Cardiac
206	Management General Cardiac 0 < 1.5 years	Cardiac
207	Management General Cardiac 1.5 < 12 years	Cardiac
208	Management General Cardiac 12 < 18 years	Cardiac
210	Management General Cardiac 18+ years	Cardiac
213	Dysrhythmia & Conductive Disorders	Cardiac
214	Congestive Heart Failure	Cardiac
215	Inflammatory Cardiac	Cardiac
216	Congenital Heart Disease	Cardiac
217	Diag Inv Angina	Cardiac
218	Management Angina	Cardiac
219	Diag Inv Vascular	Cardiac
220	Management Vascular	Cardiac
251	Diag Inv General Endocrinal 0 < 18 years	Endocrine
254	Diag Inv General Endocrinal 18 + years	Endocrine
255	Management General Endocrinal 0 < 1.5 years	Endocrine
256	Management General Endocrinal 1.5 < 6 years	Endocrine
257	Management General Endocrinal 6 < 18 years	Endocrine
258	Management General Endocrinal 18 + years	Endocrine
259	Management Diabetes < 18 years	Endocrine
260	Management Diabetes 18 + years	Endocrine
262	Thyrotoxicosis	Endocrine
264	Management Ketoacidosis	Endocrine
266	Fluid & Electrolyte < 6 years	Endocrine
267	Fluid & Electrolyte 6 + years	Endocrine
301	Diag Inv General ENT	ENT
303	Management General ENT	ENT
305	Otitis Media	ENT
306	Epistaxis	ENT
351	Diag Inv General Female Genital Disorders < 45 years	Genitourinary
352	Diag Inv General Female Genital Disorders 45 + years	Genitourinary
353	Management General Female Genital Disorders < 18 years	Genitourinary
354	Management General Female Genital Disorders 18 < 45 years	Genitourinary
355	Management General Female Genital Disorders 45 + years	Genitourinary
356	Management Contraceptive	Genitourinary

ACCS #	ACCS Name	Clinical Group
357	Diag Inv General Male Genital Disorders < 18 years	Genitourinary
358	Diag Inv General Male Genital Disorders 18 + years	Genitourinary
359	Management General Male Genital Disorders < 18 years	Genitourinary
360	Management General Male Genital Disorders 18 + years	Genitourinary
361	Diag Inv Other Genitourological Disorders < 18 years	Genitourinary
362	Diag Inv Other Genitourological Disorders 18 + years	Genitourinary
363	Management Other Genitourological Disorders < 18 years	Genitourinary
364	Management Other Genitourological Disorders 18 + years	Genitourinary
400	Diag Inv General Gastrointestinal 0 < 1.5 years	Gastrointestinal
401	Diag Inv General Gastrointestinal 1.5 < 6 years	Gastrointestinal
402	Diag Inv General Gastrointestinal 6 < 18 years	Gastrointestinal
403	Diag Inv General Gastrointestinal 18 < 45 years	Gastrointestinal
404	Diag Inv General Gastrointestinal 45 < 65 years	Gastrointestinal
405	Diag Inv General Gastrointestinal 65 + years	Gastrointestinal
406	Management General Gastrointestinal 0 < 1.5 years	Gastrointestinal
407	Management General Gastrointestinal 1.5 < 6 years	Gastrointestinal
408	Management General Gastrointestinal 6 < 18 years	Gastrointestinal
409	Management General Gastrointestinal 18 < 45 years	Gastrointestinal
410	Management General Gastrointestinal 45 < 65 years	Gastrointestinal
411	Management General Gastrointestinal 65 + years	Gastrointestinal
412	Constipation with Disimpaction	Gastrointestinal
413	GI Bleed/Perforation/Obstruction	Gastrointestinal
451	Diag Inv Hematological	Hematology
452	Management Hematological 0 < 6 years	Hematology
453	Management Hematological 6 < 12 years	Hematology
454	Management Hematological 12 < 18 years	Hematology
455	Management Hematological 18 < 65 years	Hematology
456	Management Hematological 65 + years	Hematology
501	Diag Inv Hepatobiliary	Hepatobiliary
502	Management Hepatobiliary	Hepatobiliary
551	Diag Inv Inflam Musculoskeletal 0 < 6 years	Musculoskeletal
553	Diag Inv Inflam Musculoskeletal 6 < 12 years	Musculoskeletal
554	Diag Inv Inflam Musculoskeletal 12 < 18 years	Musculoskeletal
555	Diag Inv Inflam Musculoskeletal 18 + years	Musculoskeletal
556	Diag Inv Other Musculoskeletal < 18 years	Musculoskeletal
557	Diag Inv Other Musculoskeletal 18 + years	Musculoskeletal
558	Management Inflam Musculoskeletal 0 < 6 years	Musculoskeletal
560	Management Inflam Musculoskeletal 6 < 12 years	Musculoskeletal

ACCS #	ACCS Name	Clinical Group
561	Management Inflam Musculoskeletal 12 < 18 years	Musculoskeletal
562	Management Inflam Musculoskeletal 18 + years	Musculoskeletal
563	Management Other Musculoskeletal < 18 years	Musculoskeletal
564	Management Other Musculoskeletal 18 + years	Musculoskeletal
565	Diag Inv Congenital Musculoskeletal Deformities	Musculoskeletal
566	Management Congenital Musculoskeletal Deformities	Musculoskeletal
567	Diag Inv Other Inflam Musculoskeletal	Musculoskeletal
568	Management Other Inflam Musculoskeletal	Musculoskeletal
569	Infectious Musculoskeletal	Musculoskeletal
601	Diag Inv General Neurology	Neurology
602	Management General Neurology 0 < 6 years	Neurology
603	Management General Neurology 6 < 12 years	Neurology
604	Management General Neurology 12 < 18 years	Neurology
605	Management General Neurology 18 < 65 years	Neurology
606	Management General Neurology 65 + years	Neurology
607	Migraine Headache	Neurology
608	Diag Inv Headache	Neurology
609	Management Headache	Neurology
610	Diag Inv Meningitis	Neurology
611	Management Meningitis	Neurology
612	Diag Inv Cerebrovascular	Neurology
613	Management Cerebrovascular	Neurology
614	Diag Inv Convulsions	Neurology
615	Management Convulsions	Neurology
616	Diag Inv Vertigo	Neurology
617	Management Vertigo	Neurology
651	Antepartum Routine	Obstetrics/Newborn
652	Postpartum Routine	Obstetrics/Newborn
653	Diag Inv Neonatal & Congenital	Obstetrics/Newborn
654	Management Neonatal & Congenital	Obstetrics/Newborn
656	Delivery with Postpartum Complications	Obstetrics/Newborn
657	Delivery without Postpartum Complications	Obstetrics/Newborn
658	Postpartum Conditions Outcomes Uncomplicated	Obstetrics/Newborn
659	Diag inv Pregnancy with Abortive	Obstetrics/Newborn
660	Management Pregnancy with Abortive Outcomes Uncomplicated	Obstetrics/Newborn
662	Diag Inv Antepartum	Obstetrics/Newborn
663	Management Antepartum	Obstetrics/Newborn

ACCS #	ACCS Name	Clinical Group
664	Diag Inv Pregnancy with Abortive Outcomes Complicated	Obstetrics/Newborn
665	Management Pregnancy with Abortive Outcomes Complicated	Obstetrics/Newborn
701	Diag Inv Oncological	Oncology
702	Management Oncological	Oncology
703	Radiotherapy (includes diagnosis code V58.0)	Oncology
704	IV Therapy -- Non Cancer Related	IV Therapy
751	Diag Inv Ophthalmology 0 < 12 years	Ophthalmology
752	Diag Inv Opthalmology 12 < 18 years	Ophthalmology
753	Diag Inv Ophthalmology 18 < 45 years	Ophthalmology
754	Diag Inv Ophthalmology 45 + years	Ophthalmology
755	Management Ophthalmology 0 < 12 years	Ophthalmology
756	Management Ophthalmology 12 < 18 years	Ophthalmology
757	Management Ophthalmology 18 < 45 years	Ophthalmology
758	Management Ophthalmology 45 + years	Ophthalmology
801	Diag Inv Psychiatry	Psychiatry
802	Management Psychiatry	Psychiatry
803	Drug & Alcohol Related Conditions	Psychiatry
851	Diag Inv General Respiratory < 18 years	Respiratory
852	Diag Inv General Respiratory 18 + years	Respiratory
853	Management General Respiratory 0 < 1.5 years	Respiratory
854	Management General Respiratory 1.5 < 6 years	Respiratory
855	Management General Respiratory 6 < 18 years	Respiratory
856	Management General Respiratory 18 < 65 years	Respiratory
857	Management General Respiratory 65 + years	Respiratory
863	Diag Inv Severe Respiratory Disease	Respiratory
864	Management Severe Respiratory Disease	Respiratory
901	Diag Inv Skin & Soft Tissue	Skin & Soft Tissue
902	Management Skin & Soft Tissue	Skin & Soft Tissue
906	Cellulitis	Skin & Soft Tissue
951	Diag Inv Systemic Infection	Systemic Infection
952	Management Systemic Infection < 18 years	Systemic Infection
953	Management Systemic Infection 18 < 45 years	Systemic Infection
954	Management Systemic Infection 45 + years	Systemic Infection
955	Diag Inv AIDS	Systemic Infection
956	Management AIDS	Systemic Infection
999	Ungroupable	Ungroupable
1001	Open Fracture Fingers & Toes	Trauma

ACCS #	ACCS Name	Clinical Group
1002	Closed Fracture Fingers & Toes	Trauma
1003	Fractured Nose, Open & Closed	Trauma
1004	Open Fracture & Dislocations Other	Trauma
1005	Closed Fracture & Dislocations Other	Trauma
1007	Open Wounds without Complications	Trauma
1008	Open Wound with Complications	Trauma
1009	Sprains	Trauma
1010	Contusions Fingers/Toes	Trauma
1011	Contusions except Fingers/Toes	Trauma
1012	Open Wound Eye	Trauma
1013	Foreign Body Eyes, Ears, Nose	Trauma
1014	Foreign Body except Eyes, Ears, Nose	Trauma
1015	Diag Inv Poisoning	Trauma
1016	Management Poisoning	Trauma
1017	Amputation except Fingers/Toes	Trauma
1018	Abuse/Sexual Assault 0 < 12 years	Trauma
1019	Abuse/Sexual Assault 12+ years	Trauma
1020	Burn Moderate to Severe	Trauma
1021	Minor Other Injuries	Trauma
1022	Moderate Other Injuries	Trauma
1024	Comas	Trauma
1025	Shock	Trauma
1026	Open Spinal Fracture & Dislocation	Trauma
1027	Closed Spinal Fracture & Dislocation	Trauma
1028	Diag Inv Head Injury	Trauma
1029	Management Head Injury	Trauma
1030	Diag Inv Thoraco-Abdominal & Major Vascular	Trauma
1031	Management Thoraco-Abdominal & Major Vascular	Trauma
1032	Burn Minor 0 < 6 years	Trauma
1033	Burn Minor 6 + years	Trauma
1034	Diag Inv Major Other Injuries	Trauma
1035	Management Major Other Injuries	Trauma
1051	Assessment Referral	Mental Health
1052	Assessment Intake	Mental Health
1053	Assessment Collateral	Mental Health
1054	Legal Assessment Half Day	Mental Health
1055	Legal Assessment Full Day	Mental Health
1056	Assessment Specialized	Mental Health

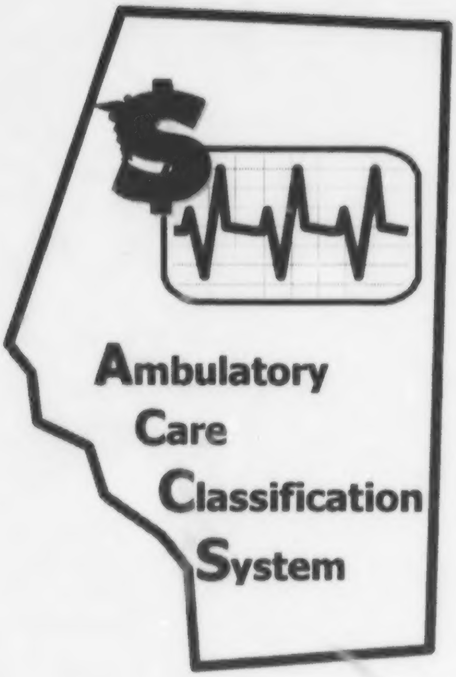
ACCS #	ACCS Name	Clinical Group
1057	Individual Therapy	Mental Health
1058	Crisis/Intervention Calls Telephone Crisis Calls	Mental Health
1059	Crisis/Intervention Calls Mobile Crisis Intervention Call	Mental Health
1060	Couple Therapy	Mental Health
1061	Family Therapy	Mental Health
1062	Group Therapy	Mental Health
1063	ECT	Mental Health
1064	Medication Administration	Mental Health
1065	Patient Specific Consultations/Case Supervision	Mental Health
1066	Patient Specific Hearings	Mental Health
1067	Patient Specific Professional Reports and Applications	Mental Health
1068	Patient Specific Critical Incident Documentation	Mental Health
1069	Diagnostic Testing/Scoring Testing Type 1	Mental Health
1070	Diagnostic Testing/Scoring Testing Type 2	Mental Health
1071	Diagnostic Testing/Scoring Testing Type 3	Mental Health
1072	Therapeutic Milieu Programs Half Day	Mental Health
1073	Therapeutic Milieu Programs Full Day	Mental Health
1074	Mental Health Education 0-120 min	Mental Health
1075	Mental Health Education 121-240 min	Mental Health
1076	Mental Health Education 241-360 min	Mental Health
1077	Mental Health Education 361-480 min	Mental Health
1101	OT Group 1	Rehab
1102	OT Group 2	Rehab
1103	OT Group 3	Rehab
1104	OT Group 4	Rehab
1105	OT Group 5	Rehab
1106	OT Group 6	Rehab
1111	Physical Therapy Group 1	Rehab
1112	Physical Therapy Group 2	Rehab
1113	Physical Therapy Group 3	Rehab
1114	Physical Therapy Group 4	Rehab
1115	Physical Therapy Group 5	Rehab
1116	Physical Therapy Group 6	Rehab
1121	Recreational Therapy Group 1	Rehab
1122	Recreational Therapy Group 2	Rehab
1123	Recreational Therapy Group 3	Rehab
1124	Recreational Therapy Group 4	Rehab
1125	Recreational Therapy Group 5	Rehab

ACCS #	ACCS Name	Clinical Group
1126	Recreational Therapy Group 6	Rehab
1131	Speech-Language Pathology Group 1	Rehab
1132	Speech-Language Pathology Group 2	Rehab
1133	Speech-Language Pathology Group 3	Rehab
1134	Speech-Language Pathology Group 4	Rehab
1135	Speech-Language Pathology Group 5	Rehab
1136	Speech-Language Pathology Group 6	Rehab
1141	Audiology Group 1	Rehab
1142	Audiology Group 2	Rehab
1143	Audiology Group 3	Rehab
1144	Audiology Group 4	Rehab
1145	Audiology Group 5 - Cochlear Implant	Rehab
1151	Resp Therapy Group 1	Rehab
1152	Resp Therapy Group 2	Rehab
1153	Resp Therapy Group 3	Rehab
1154	Resp Therapy Group 4	Rehab
1155	Resp Therapy Group 5	Rehab
1156	Resp Therapy Group 6	Rehab
1201	Clinical Nutrition Group 1	Clinical Nutrition
1202	Clinical Nutrition Group 2	Clinical Nutrition
1203	Clinical Nutrition Group 3	Clinical Nutrition
1204	Clinical Nutrition Group 4	Clinical Nutrition
1205	Clinical Nutrition Group 5	Clinical Nutrition
1206	Clinical Nutrition Group 6	Clinical Nutrition
1221	Social Work Group 1	Social Work
1222	Social Work Group 2	Social Work
1223	Social Work Group 3	Social Work
1224	Social Work Group 4	Social Work
1225	Social Work Group 5	Social Work
1226	Social Work Group 6	Social Work
1241	Psychology Group 1	Psychology
1242	Psychology Group 2	Psychology
1243	Psychology Group 3	Psychology
1244	Psychology Group 4	Psychology
1245	Psychology Group 5	Psychology
1246	Psychology Group 6	Psychology
1247	Psychology Group 7	Psychology
1248	Psychology Group 8	Psychology

ACCS #	ACCS Name	Clinical Group
1249	Psychology Group 9	Psychology
2001	Critical Care Unit or O.R. with Secondary Diagnosis	Admitted Patient
2002	Critical Care Unit or O.R. without Secondary Diagnosis	Admitted Patient
2003	Other Unit with Secondary Diagnosis	Admitted Patient
2004	Other Unit without Secondary Diagnosis	Admitted Patient
2021	DOA	Deceased Patient
2022	Died During Visit	Deceased Patient
2023	Death -- Organ Donor	Deceased Patient
2041	Patient Transferred with Secondary Diagnosis	Transferred Patient
2042	Patient Transferred without Secondary Diagnosis	Transferred Patient
2050	Diag Inv General Symptoms/Exam	Exam/Other
2051	Management General Symptoms/Exam < 18 years	Exam/Other
2052	Management General Symptoms/Exam 18 < 45 years	Exam/Other
2053	Management General Symptoms/Exam 45 < 65 years	Exam/Other
2054	Management General Symptoms/Exam 65+ years	Exam/Other
2059	Prophylactic Vaccination	Exam/Other
2060	Therapeutic Medical Counseling	Exam/Other
2062	Preoperative Exam	Exam/Other
2063	Private Practice Office Visit	Exam/Other
2064	Therapy - No Intervention Code	Exam/Other
2066	Contact/Carrier of Communicable Disease	Exam/Other
2067	Health Hazard Related to Personal/Family History	Exam/Other
2068	Routine Health Supervision	Exam/Other
2069	Postsurgical Status	Exam/Other
2070	Follow-up/Convalescence	Exam/Other
2071	Screening Exam	Exam/Other
2072	Screening Exam – Genetics	Genetics
2073	Genetic Counselling	Genetics
2081	Non-Registered Service Recipients	Stakeholder-Organization
2082	Mode of Service – Telephone	Telephone Contact
2099	Patient Left Without Being Seen	Non Ambulatory Visit

Total: 423 Active ACCS Cells

Alberta
HEALTH AND WELLNESS


Ambulatory
Care
Classification
System

2. DEVELOPED AMCARE INTERVENTIONS

Effective April 2000

Developed Amcare Interventions

PRIVATE CLINIC INTERVENTION

INTERVENTION	INTERVENTION DESCRIPTION	INTERVENTION CODE
Medical Office Assessment	Patient seeks treatment from his/her physician in the private offices in a clinic in the facility. Professional personnel paid by the facility do not provide assessment, diagnostic, consultative, treatment or teaching services to these patients. (*It is recognized that although professional personnel do not provide services to the patient, there may be indirect support provided by clerical staff.)	890001

GASTROINTESTINAL INTERVENTIONS

INTERVENTION	INTERVENTION DESCRIPTION	INTERVENTION CODE
Gastrointestinal Motility Study	A measurement of pressure to check muscle movement in gastrointestinal system. (Includes esophageal, gastric and ano-rectal motility studies)	893901

GENETIC INTERVENTIONS

INTERVENTION	INTERVENTION DESCRIPTION	INTERVENTION CODE
Screening Exam – Genetics	Special screening examinations performed to determine genetic disorders	999901
Genetic Counselling	Counselling targeted to discuss genetic disorders	944901

NEPHROLOGICAL - DIALYSIS INTERVENTIONS

INTERVENTION	DEFINITION	INTERVENTION CODE
Hemodialysis	As per ICD-9-CM	39.95
Home Hemodialysis Teaching	Teaching and treatment services (includes hemodialysis) provided to patients learning to perform hemodialysis at home	399501
Self Care Hemodialysis	Patient performs hemodialysis and requires only minimal nursing assistance	399502
Peritoneal Dialysis	As per ICD-9-CM	54.98
Home Peritoneal Dialysis Teaching	Teaching and treatment services (includes peritoneal dialysis) provided to patients learning to perform peritoneal dialysis at home	549801

MENTAL HEALTH INTERVENTIONS

INTERVENTION	DEFINITION	INTERVENTION CODE
Assessment-Referral	Screening to determine initial type of services required. (Includes triage calls).	940001
Assessment-Intake	In-depth assessment of client requirements for services (may include, for example, mental status, history, etc.)	940002
Assessment-Collateral	Contact with a collateral person for the purpose of obtaining assessment information.	940003
Legal Assessment	Court ordered assessment.	
Half Day (4 hours)		940004
Full Day (> 4 hours)		940005
Assessment-Specialized	Specialized assessment such as vocational training, ECT work-up, other discipline specific assessments, community based crisis assessments.	940006

MENTAL HEALTH INTERVENTIONS

INTERVENTION	DEFINITION	INTERVENTION CODE
Crisis/Intervention Calls Telephone Crisis Call	Telephone crisis calls for the purposes of addressing immediate personal/familial crisis.	940007
Mobile Crisis Intervention Call	An unscheduled visit to a client's location to address an immediate mental health crisis.	940008
Individual Therapy	Therapy provided by any service provider type-therapeutic focus is not the couple or family unit.	940009
Couple Therapy	Therapy which has as its primary focus a relationship with a significant other but not on the remainder of the family. Significant other may or may not be present. A contact form is completed only for the program client.	940010
Family Therapy	Therapy which has as its primary focus the familial system. A contact form is completed only for the program client. Family may or may not be present.	94.42
Group Therapy	Contacts spent within a therapeutic group context. A group contact form will be completed.	940011
ECT	Contact to prepare for or administer ECT treatment.	94.27
Medication Administration/Assessment	Administration of an oral, topical or injected medication or medication assessment.	940012
Patient Specific/ Consultations Case Supervision	Consults with other professionals or collaterals for the purpose of case management and discharge planning. (For reporting purposes, each service professional reports **ONLY** on their own patients)	940013
Patient Specific Hearings	Testifying in legal hearing (eg., Court Appearance, Review Panels, Board of Review, WCB).	940014
Patient Specific Professional Reports and Applications	Occasional documentation required for legal, financial or clinical purposes. EG., writing reports and applications such as AISH applications, WCB reports, court reports. (Excludes routine documentation and charting.)	940015
Patient Specific Critical Incident Documentation	All formal reports required as a result of managing a specific critical incident.	940016

MENTAL HEALTH INTERVENTIONS

INTERVENTION	DEFINITION	INTERVENTION CODE
Diagnostic Testing/Scoring	Face to face contact for the purpose of administration of any professional testing or neuropsychological assessment intervention. Any reporting using this category must be accompanied by a write-up in the form of an assessment report.	
Testing Type 1 (□ 2 hours)		940017
Testing Type 2 (Half Day)		940018
Testing Type 3 (Full Day)		940019
Therapeutic Milieu Programs	A non-structured or semi-structured activity for the purposes of observation and/or therapy including informal teaching and social interaction.	
Half Day (□ 4 hours)		940020
Full Day (> 4 hours)		940021
Mental Health Education	Education of individuals or groups with the direct purpose of improving mental health status either now or in future (i.e., includes primary and secondary prevention, as well as promotion).	
0-120 minutes (2 hrs.)		940022
121-240 minutes (4 hrs.)		940023
241-360 minutes (6 hrs.)		940024
361-480 minutes (8 hrs.)		940025

* NB: Routine documentation is included with each intervention.

ASSOCIATED MENTAL HEALTH DEFINITIONS

COLLATERAL
A person who is associated with a mental health client.

CONTACT
A contact is the occurrence of a face to face or technologically mediated (ie., telephone, teleconference, videoconference) contact with a mental health client/patient in which the **MAJOR** intent is to provide psychological or psychiatric treatment.

REHABILITATION INTERVENTIONS

OCCUPATIONAL THERAPY

INTERVENTION AND DEFINITION	INTERVENTION CODE		
	LOW (0-20 MIN)	MED (21-45 MIN)	HIGH (46+ MIN)
ASSESSMENT • Activities for the sole purposes of evaluating the need for the service, the nature of the problem, the identification of the disorder or abnormality and the extent of services required. • Is a formal, comprehensive process which generally uses specific assessment tools or methods to assess physical, psycho-social, cognitive abilities, medical requirements, environment and formal and informal supports. • Includes preparation, collection of information, analysis of the assessment information, formulation of a working diagnosis, development of the care/treatment plan and documentation of assessment findings from the patient, family, employer, teacher, written records including medical charts and other sources. • Excludes the ongoing evaluation associated with a specific intervention.	938301	938304	938307
THERAPEUTIC INTERVENTION • Activities carried out with a patient/significant other(s) that are aimed at improving/maintaining health status, or minimizing the impact of deterioration on the quality of life. • Includes the preparation for treatment of a patient(s), the provision of specific techniques and procedures to a patient(s), support activities, monitoring of the patient's progress to evaluate the result of a specific intervention and the need to continue and/or modify treatment, and the related clinical documentation.	938302	938305	938308
CONSULTATION/COLLABORATION (INDIRECT SERVICE RECIPIENT SUPPORT) • Formal or informal contact with personnel of the facility, community or other agencies for discussion regarding specific patients and/or significant others, in order to obtain, provide or exchange information relative to the patient's care. • Includes any regularly scheduled/attended meetings of professionals to coordinate team efforts in services to patients, and the related clinical documentation	938303	938306	938309

PHYSICAL THERAPY

INTERVENTION AND DEFINITION	INTERVENTION CODE		
	LOW (0-20 MIN)	MED (21-45 MIN)	HIGH (46+ MIN)
ASSESSMENT • Activities for the sole purposes of evaluating the need for the service, the nature of the problem, the identification of the disorder or abnormality and the extent of services required. • Is a formal, comprehensive process which generally uses specific assessment tools or methods to assess physical, psycho-social, cognitive abilities, medical requirements, environment and formal and informal supports. • Includes preparation, collection of information, analysis of the assessment information, formulation of a working diagnosis, development of the care/treatment plan and documentation of assessment findings from the patient, family, employer, teacher, written records including medical charts and other sources. • Excludes the ongoing evaluation associated with a specific intervention.	930001	930004	930007
THERAPEUTIC INTERVENTION • Activities carried out with a patient/significant other(s) that are aimed at improving/maintaining health status, or minimizing the impact of deterioration on the quality of life. • Includes the preparation for treatment of a patient(s), the provision of specific techniques and procedures to a patient(s), support activities, monitoring of the patient's progress to evaluate the result of a specific intervention and the need to continue and/or modify treatment, and the related clinical documentation	930002	930005	930008
CONSULTATION/COLLABORATION (INDIRECT SERVICE RECIPIENT SUPPORT) • Formal or informal contact with personnel of the facility, community or other agencies for discussion regarding specific patients and/or significant others, in order to obtain, provide or exchange information relative to the patient's care. • Includes any regularly scheduled/attended meetings of professionals to coordinate team efforts in services to patients, and the related clinical documentation	930003	930006	930009

RECREATIONAL THERAPY

INTERVENTION AND DEFINITION	INTERVENTION CODE		
	LOW (0-20 MIN)	MED (21-45 MIN)	HIGH (46+ MIN)
ASSESSMENT • Activities for the sole purposes of evaluating the need for the service, the nature of the problem, the identification of the disorder or abnormality and the extent of services required. • Is a formal, comprehensive process which generally uses specific assessment tools or methods to assess physical, psycho-social, cognitive abilities, medical requirements, environment and formal and informal supports. • Includes preparation, collection of information, analysis of the assessment information, formulation of a working diagnosis, development of the care/treatment plan and documentation of assessment findings from the patient, family, employer, teacher, written records including medical charts and other sources. • Excludes the ongoing evaluation associated with a specific intervention.	938101	938104	938107
THERAPEUTIC INTERVENTION • Activities carried out with a patient/significant other(s) that are aimed at improving/maintaining health status, or minimizing the impact of deterioration on the quality of life. • Includes the preparation for treatment of a patient(s), the provision of specific techniques and procedures to a patient(s), support activities, monitoring of the patient's progress to evaluate the result of a specific intervention and the need to continue and/or modify treatment, and the related clinical documentation.	938102	938105	938108
CONSULTATION/COLLABORATION (INDIRECT SERVICE RECIPIENT SUPPORT) • Formal or informal contact with personnel of the facility, community or other agencies for discussion regarding specific patients and/or significant others, in order to obtain, provide or exchange information relative to the patient's care. • Includes any regularly scheduled/attended meetings of professionals to coordinate team efforts in services to patients, and the related clinical documentation	938103	938106	938109

SPEECH LANGUAGE PATHOLOGY

INTERVENTION AND DEFINITION	**INTERVENTION CODE**		
	LOW (0-20 MIN)	**MED (21-45 MIN)**	**HIGH (46+ MIN)**
ASSESSMENT • Activities for the sole purposes of evaluating the need for the service, the nature of the problem, the identification of the disorder or abnormality and the extent of services required. • Is a formal, comprehensive process which generally uses specific assessment tools or methods to assess physical, psycho-social, cognitive abilities, medical requirements, environment and formal and informal supports. • Includes preparation, collection of information, analysis of the assessment information, formulation of a working diagnosis, development of the care/treatment plan and documentation of assessment findings from the patient, family, employer, teacher, written records including medical charts and other sources. • Excludes the ongoing evaluation associated with a specific intervention.	937001	937003	937005
THERAPEUTIC INTERVENTION • Activities carried out with a patient/significant other(s) that are aimed at improving/maintaining health status, or minimizing the impact of deterioration on the quality of life. • Includes the preparation for treatment of a patient(s), the provision of specific techniques and procedures to a patient(s), support activities, monitoring of the patient's progress to evaluate the result of a specific intervention and the need to continue and/or modify treatment, and the related clinical documentation.	937002	937004	937006
CONSULTATION/COLLABORATION (INDIRECT SERVICE RECIPIENT SUPPORT) • Formal or informal contact with personnel of the facility, community or other agencies for discussion regarding specific patients and/or significant others, in order to obtain, provide or exchange information relative to the patient's care. • Includes any regularly scheduled/attended meetings of professionals to coordinate team efforts in services to patients, and the related clinical documentation	937007	937008	937009

REHABILITATION INTERVENTIONS
AUDIOLOGY

INTERVENTION AND DEFINITION	INTERVENTION CODE		
	LOW (0-20 MIN)	MED (21-45 MIN)	HIGH (46+ MIN)
ASSESSMENT • Activities for the sole purposes of evaluating the need for the service, the nature of the problem, the identification of the disorder or abnormality and the extent of services required. • Is a formal, comprehensive process which generally uses specific assessment tools or methods to assess physical, psycho-social, cognitive abilities, medical requirements, environment and formal and informal supports. • Includes preparation, collection of information, analysis of the assessment information, formulation of a working diagnosis, development of the care/treatment plan and documentation of assessment findings from the patient, family, employer, teacher, written records including medical charts and other sources. • Excludes the ongoing evaluation associated with a specific intervention.	954001	954004	954007
THERAPEUTIC INTERVENTION • Activities carried out with a patient/significant other(s) that are aimed at improving/maintaining health status, or minimizing the impact of deterioration on the quality of life. • Includes the preparation for treatment of a patient(s), the provision of specific techniques and procedures to a patient(s), support activities, monitoring of the patient's progress to evaluate the result of a specific intervention and the need to continue and/or modify treatment, and the related clinical documentation.	954002	954005	954008
CONSULTATION/COLLABORATION (INDIRECT SERVICE RECIPIENT SUPPORT) • Formal or informal contact with personnel of the facility, community or other agencies for discussion regarding specific patients and/or significant others, in order to obtain, provide or exchange information relative to the patient's care. • Includes any regularly scheduled/attended meetings of professionals to coordinate team efforts in services to patients, and the related clinical documentation	954003	954006	954009

AUDIOLOGY

INTERVENTION AND DEFINITION	INTERVENTION CODE		
	LOW (0-60 MIN)	MED (61-120 MIN)	HIGH (120+ MIN)
COCHLEAR -Treatment for Implant	954010	954011	954012

RESPIRATORY THERAPY

INTERVENTION AND DEFINITION	INTERVENTION CODE		
	LOW (0-20 MIN)	MED (21-45 MIN)	HIGH (46+ MIN)
ASSESSMENT • Activities for the sole purposes of evaluating the need for the service, the nature of the problem, the identification of the disorder or abnormality and the extent of services required. • Is a formal, comprehensive process which generally uses specific assessment tools or methods to assess physical, psycho-social, cognitive abilities, medical requirements, environment and formal and informal supports. • Includes preparation, collection of information, analysis of the assessment information, formulation of a working diagnosis, development of the care/treatment plan and documentation of assessment findings from the patient, family, employer, teacher, written records including medical charts and other sources. • Excludes the ongoing evaluation associated with a specific intervention.	939001	939004	939007
THERAPEUTIC INTERVENTION • Activities carried out with a patient/significant other(s) that are aimed at improving/maintaining health status, or minimizing the impact of deterioration on the quality of life. • Includes the preparation for treatment of a patient(s), the provision of specific techniques and procedures to a patient(s), support activities, monitoring of the patient's progress to evaluate the result of a specific intervention and the need to continue and/or modify treatment, and the related clinical documentation.	939002	939005	939008
CONSULTATION/COLLABORATION (INDIRECT SERVICE RECIPIENT SUPPORT) • Formal or informal contact with personnel of the facility, community or other agencies for discussion regarding specific patients and/or significant others, in order to obtain, provide or exchange information relative to the patient's care. • Includes any regularly scheduled/attended meetings of professionals to coordinate team efforts in services to patients, and the related clinical documentation	939003	939006	939009

NON REHABILITATION INTERVENTIONS

CLINICAL NUTRITION

INTERVENTION AND DEFINITION	INTERVENTION CODE		
	LOW (0-20 MIN)	MED (21-45 MIN)	HIGH (46+ MIN)
ASSESSMENT • Activities for the sole purposes of evaluating the need for the service, the nature of the problem, the identification of the disorder or abnormality and the extent of services required. • Is a formal, comprehensive process which generally uses specific assessment tools or methods to assess physical, psycho-social, cognitive abilities, medical requirements, environment and formal and informal supports. • Includes preparation, collection of information, analysis of the assessment information, formulation of a working diagnosis, development of the care/treatment plan and documentation of assessment findings from the patient, family, employer, teacher, written records including medical charts and other sources. • Excludes the ongoing evaluation associated with a specific intervention.	893910	893904	893907
THERAPEUTIC INTERVENTION • Activities carried out with a patient/significant other(s) that are aimed at improving/maintaining health status, or minimizing the impact of deterioration on the quality of life. • Includes the preparation for treatment of a patient(s), the provision of specific techniques and procedures to a patient(s), support activities, monitoring of the patient's progress to evaluate the result of a specific intervention and the need to continue and/or modify treatment, and the related clinical documentation.	893902	893905	893908
CONSULTATION/COLLABORATION (INDIRECT SERVICE RECIPIENT SUPPORT) • Formal or informal contact with personnel of the facility, community or other agencies for discussion regarding specific patients and/or significant others, in order to obtain, provide or exchange information relative to the patient's care. • Lncludes any regularly scheduled/attended meetings of professionals to coordinate team efforts in services to patients, and the related clinical documentation	893903	893906	893909

SOCIAL WORK

INTERVENTION AND DEFINITION	INTERVENTION CODE		
	LOW (0-20 MIN)	MED (21-45 MIN)	HIGH (46+ MIN)
ASSESSMENT • Activities for the sole purposes of evaluating the need for the service, the nature of the problem, the identification of the disorder or abnormality and the extent of services required. • Is a formal, comprehensive process which generally uses specific assessment tools or methods to assess physical, psycho-social, cognitive abilities, medical requirements, environment and formal and informal supports. • Includes preparation, collection of information, analysis of the assessment information, formulation of a working diagnosis, development of the care/treatment plan and documentation of assessment findings from the patient, family, employer, teacher, written records including medical charts and other sources. • Excludes the ongoing evaluation associated with a specific intervention.	941001	941004	941007
THERAPEUTIC INTERVENTION • Activities carried out with a patient/significant other(s) that are aimed at improving/maintaining health status, or minimizing the impact of deterioration on the quality of life. • Includes the preparation for treatment of a patient(s), the provision of specific techniques and procedures to a patient(s), support activities, monitoring of the patient's progress to evaluate the result of a specific intervention and the need to continue and/or modify treatment, and the related clinical documentation.	941002	941005	941008
CONSULTATION/COLLABORATION (INDIRECT SERVICE RECIPIENT SUPPORT) • Formal or informal contact with personnel of the facility, community or other agencies for discussion regarding specific patients and/or significant others, in order to obtain, provide or exchange information relative to the patient's care. • Lncludes any regularly scheduled/attended meetings of professionals to coordinate team efforts in services to patients, and the related clinical documentation	941003	941006	941009

PSYCHOLOGY (REHABILITATION)

INTERVENTION AND DEFINITION	INTERVENTION CODE		
	LOW (0-20 MIN)	MED (21-45 MIN)	HIGH (46+ MIN)
ASSESSMENT • Activities for the sole purposes of evaluating the need for the service, the nature of the problem, the identification of the disorder or abnormality and the extent of services required. • Is a formal, comprehensive process which generally uses specific assessment tools or methods to assess physical, psycho-social, cognitive abilities, medical requirements, environment and formal and informal supports. • Includes preparation, collection of information, analysis of the assessment information, formulation of a working diagnosis, development of the care/treatment plan and documentation of assessment findings from the patient, family, employer, teacher, written records including medical charts and other sources. • Excludes the ongoing evaluation associated with a specific intervention.	942001	942004	942007
THERAPEUTIC INTERVENTION • Activities carried out with a patient/significant other(s) that are aimed at improving/maintaining health status, or minimizing the impact of deterioration on the quality of life. • Includes the preparation for treatment of a patient(s), the provision of specific techniques and procedures to a patient(s), support activities, monitoring of the patient's progress to evaluate the result of a specific intervention and the need to continue and/or modify treatment, and the related clinical documentation.	942002	942005	942008
CONSULTATION/COLLABORATION (INDIRECT SERVICE RECIPIENT SUPPORT) • Formal or informal contact with personnel of the facility, community or other agencies for discussion regarding specific patients and/or significant others, in order to obtain, provide or exchange information relative to the patient's care. • Lncludes any regularly scheduled/attended meetings of professionals to coordinate team efforts in services to patients, and the related clinical documentation	942003	942006	942009
Neuropsychological Testing/Scoring Testing Type 1 (less than 2 hours)	9420[illegible]		
Testing Type 2 (Half Day)	942018		
Testing Type 3 (Full Day)	942019		

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3. LIST OF ACCS INVESTIGATIVE TECHNOLOGIES

Effective April 2000

List of ACCS Investigative Technologies

ICD-9-CM Code	Inv Tech	Intervention Description
8701	XRAY	Pneumoencephalogram
8702	XRAY	Oth contr radiogram brain/skull
8705	XRAY	Contrast dacryocystogram
8706	XRAY	Contrast radiogram nasopharynx
8707	XRAY	Contrast laryngogram
8709	XRAY	Oth soft tiss xray face/hd/neck
8713	XRAY	Temporomandib contr arthrogram
8714	XRAY	Contrast radiogram of orbit
8715	XRAY	Contrast radiogram of sinus
8716	XRAY	Other xray of facial bones
8717	XRAY	Other xray of skull
8722	XRAY	Other xray of cervical spine
8723	XRAY	Other xray of thoracic spine
8724	XRAY	Other xray of lumbosacral spine
8729	XRAY	Other xray of spine
8731	XRAY	Endotracheal bronchogram
8732	XRAY	Other contrast bronchogram
8733	XRAY	Mediastinal pneumogram
8735	MAMM	Contrast radiogram mammary duct
8736	MAMM	Xerography of breast
8737	MAMM	Other mammography
8738	XRAY	Sinogram of chest wall
8739	XRAY	Oth soft tissue xray chest wall
8742	XRAY	Other tomography of thorax
8743	XRAY	Xray of ribs/sternum/clavicle
8744	CHEST	Routine chest xray so described
8749	XRAY	Other chest xray
8754	XRAY	Other cholangiogram
8759	XRAY	Other biliary tract xray
8761	XRAY	Barium swallow
8762	XRAY	Upper GI series
8763	XRAY	Small bowel series
8764	XRAY	Lower GI series
8765	XRAY	Other xray of intestine
8769	XRAY	Other digestive tract xray
8772	XRAY	Other nephrotomogram

ICD -9-CM Code	Inv Tech	Intervention Description
8773	XRAY	Intravenous pyelogram
8776	XRAY	Retrograde cystourethrogram
8777	XRAY	Other cystogram
8778	XRAY	Ileal conduitogram
8779	XRAY	Other xray of urinary system
8781	XRAY	Xray of gravid uterus
8782	XRAY	Gas contr hysterosalpingogram
8783	XRAY	Opaque dye contr hysterosalping
8784	XRAY	Percutaneous hysterogram
8785	XRAY	Oth xray fallopian tubes/uterus
8789	XRAY	Oth xray female genital organs
8791	XRAY	Contrast seminal vesiculogram
8792	XRAY	Oth xray prost/seminal vesicles
8793	XRAY	Contrast epididymogram
8795	XRAY	Oth xray epididymis/vas deferen
8799	XRAY	Other xray male genital organs
8802	XRAY	Other abdominal tomography
8803	XRAY	Sinogram of abdominal wall
8809	XRAY	Oth soft tissue xray abdom wall
8811	XRAY	Pelv opaque dye contr radiogram
8812	XRAY	Pelvic gas contrast radiography
8813	XRAY	Other peritoneal pneumogram
8814	XRAY	Retroperitoneal fistulogram
8815	XRAY	Retroperitoneal pneumogram
8816	XRAY	Other retroperitoneal xray
8819	XRAY	Other xray of abdomen
8821	XRAY	Skeletal xray shoulder/upper arm
8822	XRAY	Skeletal xray elbow and forearm
8823	XRAY	Skeletal xray of wrist and hand
8824	XRAY	Skeletal xray of upper limb NOS
8825	XRAY	Pelvimetry
8826	XRAY	Other skeletal xray pelvis/hip
8827	XRAY	Skelet xray thigh/knee/low leg
8828	XRAY	Skeletal xray of ankle and foot
8829	XRAY	Skeletal xray of lower limb NOS
8831	XRAY	Skeletal series
8832	XRAY	Contrast arthrogram
8833	XRAY	Other skeletal xray
8835	XRAY	Oth soft tissue xray upper limb

ICD-9-CM	Inv Tech	Intervention Description
8837	XRAY	Oth soft tissue xray lower limb
8839	XRAY	Xray other and unspecified
8871	ULTRA	Diagnostic ultrasound head/neck
8872	ULTRA	Diagnostic ultrasound of Heart
8873	ULTRA	Dx ultrasound oth sites thorax
8874	ULTRA	Dx ultrasound digestive system
8875	ULTRA	Dx ultrasound urinary system
8876	ULTRA	Dx ultrasound abdomen/retroper
8877	ULTRA	Dx ultrasound periph vascu sys
8878	ULTRA	Dx ultrasound of gravid uterus
8879	ULTRA	Other diagnostic ultrasound
8890	XRAY	Diagnostic Imaging NEC
8910	EEG	Intracarotid amobarital test
8914	EEG	Electroencephalogram
8919	EEG	Video/Radio Electroenceph Montr
8941	STRES	CV stress test using treadmill
8942	STRES	Masters' two-step stress test
8943	STRES	CV stress test bicycle ergometr
8944	STRES	Oth cardiovascular stress test
9512	XRAY	Fluor angiography/angioscpy eye
9513	ULTRA	Ultrasound study of eye
9514	XRAY	Xray study of eye

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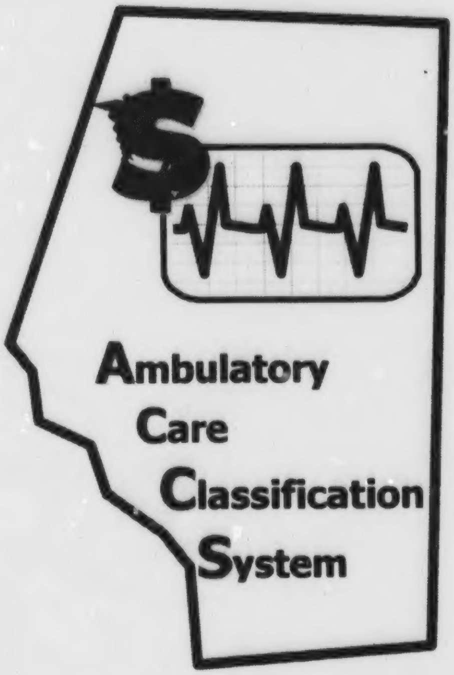
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4. ACCS INTERVENTION/ ICD-9-CM INTERVENTION CODES

Effective April 2000

ACCS Interventions (Designated With ➡)

ICD-9-CM Intervention Codes

(I =Investigative Technology from Section 3)

	Code #	Description
	0001	Operation Abandon Before Onset
	0002	Operat Not Completed(Aband Dur)
	0101	Cisternal Puncture
	0102	Ventriculopunct Thru Prev Cath
	0109	Other Cranial Puncture
	0111	Closed Biopsy Cerebral Meninges
	0112	Open Biopsy Cerebral Meninges
➡	0113	Closed Biopsy Of Brain
➡	0114	Open Biopsy Of Brain
➡	0115	Biopsy Of Skull
	0118	Oth Dx Proc Brain/Cereb Mening
	0119	Oth Diagnostic Procedures Skull
	0121	Incision/Drainage Cranial Sinus
	0122	Remov Intracran Neurostimulator
	0123	Reopening Of Craniotomy Site
	0124	Other Craniotomy
	0125	Other Craniectomy
	0131	Incision Of Cerebral Meninges
	0132	Lobotomy And Tractotomy
	0139	Other Incision Of Brain
	0141	Operations On Thalamus
	0142	Operations On Globus Pallidus
	0151	Excisn Les/Tiss Cereb Meninges
	0152	Hemispherectomy
	0153	Lobectomy Of Brain
	0159	Oth Excisn/Destr Les/Tiss Brain
➡	016	Excision Of Lesion Of Skull

	Code #	Description
	0201	Opening Of Cranial Suture
	0202	Elevat Skull Fracture Fragments
	0203	Formation Of Cranial Bone Flap
	0204	Bone Graft To Skull
	0205	Insertion Of Skull Plate
	0206	Other Cranial Osteoplasty
	0207	Removal Of Skull Plate
	0211	Simple Suture Dura Mater Brain
	0212	Other Repair Cerebral Meninges
	0213	Ligation Of Meningeal Vessel
	0214	Choroid Plexectomy
	022	Ventriculostomy
	0231	Ventricular Shunt To Head/Neck
	0232	Ventricular Shunt To Circ Sys
	0233	Ventricular Shunt To Thorac Cav
	0234	Ventricular Shunt Abdom Cav/Org
	0235	Ventricular Shunt To Urin Sys
	0239	Oth Operations Drain Ventricle
	0241	Irrigation Of Ventricular Shunt
➡	0242	Replacement Ventricular Shunt
	0243	Removal Of Ventricular Shunt
	0291	Lysis Of Cortical Adhesions
	0292	Repair Of Brain
	0293	Implant Intracranial Neurostim
	0294	Insert/Replac Skull Tongs/Halo
	0295	Removal Skull Tongs/Halo Device
	0296	Insertion Sphenoidal Electrodes
	0299	Oth Op Skull/Brain/Cereb Mening
	0301	Removal Fb From Spinal Canal
	0302	Reopening Of Laminectomy Site

	Code #	Description
	0309	Oth Explor/Decompres Spin Canal
➡	031	Division Intraspinal Nerve Root
➡	0321	Percutaneous Chordotomy
➡	0329	Other Chordotomy
➡	0331	Spinal Tap
➡	0332	Biopsy Of Spinal Cord/Meninges
	0339	Oth Dx Proc Spinal Cord/Struct
	034	Excis/Destr Les Spinal Cord/Men
	0351	Repair Of Spinal Meningocele
	0352	Repair Spinal Myelomeningocele
	0353	Repair Of Vertebral Fracture
	0359	Oth Repair/Plast Op Spin Struct
	036	Lysis Adhes Spinal Cord/Nrv Rts
	0371	Spin Subarach-Peritoneal Shunt
	0372	Spinal Subarach-Ureteral Shunt
	0379	Other Shunt Of Spinal Theca
➡	038	Inject Destr Agent Spinal Canal
➡	0390	Insrt Cath Spin/Infus Ther Subs
➡	0391	Injectn Anesthetic Spinal Canal
➡	0392	Inject Other Agent Spinal Canal
	0393	Insert/Replace Spinal Neurostim
➡	0394	Removal Spinal Neurostimulator
➡	0395	Spinal Blood Patch
➡	0396	Percutaneous Denervation Facet
	0397	Revision Of Spinal Thecal Shunt
	0398	Removal Of Spinal Thecal Shunt
	0399	Oth Operation Spinal Cord/Canal
	0401	Excision Of Acoustic Neuroma
➡	0402	Division Of Trigeminal Nerve
➡	0403	Divis/Crush Oth Cran/Periph Nrv

	Code #	Description
➡	0404	Oth Incision Cran/Periph Nerves
➡	0405	Gasserian Ganglionectomy
➡	0406	Oth Cran/Periph Ganglionectomy
➡	0407	Oth Excis/Avuls Cran/Periph Nrv
➡	0411	Cl Biopsy Cran/Periph Nrv/Gangl
➡	0412	Op Biopsy Cran/Periph Nrv/Gangl
	0419	Oth Dx Proc Cran/Periph Nrv/Gng
➡	042	Destruction Cran/Periph Nerves
➡	043	Suture Cranial/Peripheral Nerve
➡	0441	Decompres Trigeminal Nerve Root
➡	0442	Oth Cranial Nerve Decompression
➡	0443	Release Of Carpal Tunnel
➡	0444	Release Of Tarsal Tunnel
➡	0449	Oth Periph Nrv/Gangin Decompres
➡	045	Cranial/Peripheral Nerve Graft
➡	046	Transposition Cran/Periph Nerve
➡	0471	Hypoglossal-Facial Anastomosis
➡	0472	Accessory-Facial Anastomosis
➡	0473	Accessory-Hypoglossal Anastomos
➡	0474	Oth Anastomosis Cran/Periph Nrv
➡	0475	Revis Prev Repr Cran/Periph Nrv
➡	0476	Repr Old Injury Cran/Periph Nrv
➡	0479	Other Neuroplasty
➡	0480	Peripheral Nerve Injection Nos
➡	0481	Injct Anesth Periph Nrv Analges
➡	0489	Injct Agnt Exc Neurolyt Per Nrv
	0491	Neurectasis
➡	0492	Implant/Replac Periph Neurostim
➡	0493	Removal Periph Neurostimulator
➡	0499	Other Operat Cran/Periph Nerves

	Code #	Description
	050	Divis Sympathetic Nerve/Gangln
➡	0511	Biopsy Sympathetic Nerve/Gangln
	0519	Oth Dx Proc Sympathet Nrv/Gangl
	0521	Sphenopalatine Ganglionectomy
➡	0522	Cervical Sympathectomy
	0523	Lumbar Sympathectomy
	0524	Presacral Sympathectomy
	0525	Periarterial Sympathectomy
➡	0529	Other Sympathectomy/Ganglionect
➡	0531	Inject Anesth Sympath Nrv Analg
➡	0532	Inject Neurolytic Sympath Nerve
➡	0539	Oth Inject Sympath Nerve/Gangln
➡	0581	Repair Sympathetic Nerve/Gangln
➡	0589	Oth Op Sympathetic Nerve/Gangln
	059	Other Operations Nervous System
➡	0601	Aspiration Of Thyroid Field
	0602	Reopening Wound Thyroid Field
➡	0609	Other Incision Of Thyroid Field
➡	0611	Closed Biopsy Of Thyroid Gland
	0612	Open Biopsy Of Thyroid Gland
➡	0613	Biopsy Of Parathyroid Gland
	0619	Oth Dx Proc Thyroid/Parathyroid
	062	Unilateral Thyroid Lobectomy
➡	0631	Excision Of Lesion Of Thyroid
	0639	Other Partial Thyroidectomy
	064	Complete Thyroidectomy
	0650	Substernal Thyroidectomy Nos
	0651	Part Substernal Thyroidectomy
	0652	Comp Substernal Thyroidectomy
	066	Excision Of Lingual Thyroid

	Code #	Description
➡	067	Excisn Thyroglossal Duct/Tract
	0681	Complete Parathyroidectomy
	0689	Other Parathyroidectomy
	0691	Division Of Thyroid Isthmus
	0692	Ligation Of Thyroid Vessels
	0693	Suture Of Thyroid Gland
	0694	Thyroid Tissue Reimplantation
	0695	Parathyroid Tiss Reimplantation
	0698	Other Operations Thyroid Glands
	0699	Other Operat Parathyroid Glands
	0700	Exploration Adrenal Field Nos
	0701	Unilateral Explor Adrenal Field
	0702	Bilateral Explor Adrenal Field
➡	0711	Closed Biopsy Of Adrenal Gland
	0712	Open Biopsy Of Adrenal Gland
	0713	Biopsy Pituitary Gl Transfront
	0714	Biopsy Pituitary Gl Transsphen
	0715	Biopsy Pituitary Gland Unspec
➡	0716	Biopsy Of Thymus
	0717	Biopsy Of Pineal Gland
	0719	Oth Dx Proc Adren/Pit/Pin/Thym
	0721	Excision Lesion Adrenal Gland
	0722	Unilateral Adrenalectomy
	0729	Other Partial Adrenalectomy
	073	Bilateral Adrenalectomy
	0741	Incision Of Adrenal Gland
	0742	Division Nerves Adrenal Glands
	0743	Ligation Of Adrenal Vessels
	0744	Repair Of Adrenal Gland
	0745	Reimplantation Adrenal Tissue

	Code #	Description
	0749	Oth Op Adrenal Gland/Nerve/Vess
	0751	Exploration Of Pineal Field
	0752	Incision Of Pineal Gland
	0753	Partial Excision Pineal Gland
	0754	Total Excision Of Pineal Gland
	0759	Other Operations Pineal Gland
	0761	Part Excis Pituitary Transfront
	0762	Part Excis Pituitary Transsphen
	0763	Part Excision Pituitary Unspec
	0764	Tot Excis Pituitary Transfront
	0765	Tot Excis Pituitary Transsphen
	0768	Total Excision Pituitary Other
	0769	Total Excision Pituitary Unspec
	0771	Exploration Of Pituitary Fossa
	0772	Incision Of Pituitary Gland
	0779	Other Operations On Hypophysis
	0780	Thymectomy Nos
	0781	Partial Excision Of Thymus
	0782	Total Excision Of Thymus
	0791	Exploration Of Thymus Field
	0792	Incision Of Thymus
	0793	Repair Of Thymus
	0794	Transplantation Of Thymus
	0799	Other Operations On Thymus
➡	0801	Incision Of Lid Margin
➡	0802	Severing Of Blepharorrhaphy
➡	0809	Other Incision Of Eyelid
➡	0811	Biopsy Of Eyelid
	0819	Other Dx Procedures On Eyelid
➡	0820	Removal Of Lesion Of Eyelid Nos

	Code #	Description
➡	0821	Excision Of Chalazion
➡	0822	Excis Oth Minor Lesion Eyelid
➡	0823	Excis Maj Les Eyelid Part-Thick
➡	0824	Excis Maj Les Eyelid Full-Thick
➡	0825	Destruction Of Lesion Of Eyelid
➡	0831	Repr Bleph Front Musc Tech/Sut
➡	0832	Repr Bleph Front Tech/Fasc Slng
➡	0833	Repr Bleph Resect/Advance Levat
➡	0834	Repr Bleph Oth Levat Musc Tech
➡	0835	Repr Blepharoptosis Tarsal Tech
➡	0836	Repr Blepharoptosis Other Tech
➡	0837	Reduction Overcorrection Ptosis
➡	0838	Correction Of Lid Retraction
➡	0841	Repr Entropn/Ectropn Thermocaut
➡	0842	Repr Entrop/Ectropn Suture Tech
➡	0843	Repair Ent/Ectropn Wedge Resect
➡	0844	Repr Entrop/Ectropn Lid Reconst
➡	0849	Oth Repair Entropion/Ectropion
➡	0851	Canthotomy
➡	0852	Blepharorrhaphy
➡	0859	Other Adjustment Lid Position
➡	0861	Reconst Eyelid Skin Flap/Graft
➡	0862	Reconst Lid Muc Memb Flap/Graft
➡	0863	Reconst Lid Hair Follicle Graft
➡	0864	Reconst Lid Tarsoconjunct Flap
➡	0869	Oth Reconst Eyelid W Flap/Graft
➡	0870	Reconstruction Of Eyelid Nos
➡	0871	Reconst Lid Margin Part-Thick
➡	0872	Other Reconst Eyelid Part-Thick
➡	0873	Reconst Lid Margin Full-Thick

	Code #	Description
➡	0874	Other Reconst Eyelid Full-Thick
➡	0881	Linear Repair Lacn Eyelid/Brow
➡	0882	Repr Lacn Lid Margin Part-Thick
➡	0883	Oth Repr Lacn Eyelid Part-Thick
➡	0884	Repr Lacn Lid Margin Full-Thick
➡	0885	Oth Repr Lacn Eyelid Full-Thick
➡	0886	Lower Eyelid Rhytidectomy
➡	0887	Upper Eyelid Rhytidectomy
➡	0889	Other Eyelid Repair
➡	0891	Electrosurgical Epilatn Eyelid
➡	0892	Cryosurgical Epilation Eyelid
➡	0893	Other Epilation Of Eyelid
➡	0899	Other Operations On Eyelids
➡	090	Incision Of Lacrimal Gland
➡	0911	Biopsy Of Lacrimal Gland
➡	0912	Biopsy Of Lacrimal Sac
➡	0919	Oth Dx Procedures Lacrimal Sys
➡	0920	Excision Of Lacrimal Gland Nos
➡	0921	Excision Lesion Lacrimal Gland
	0922	Other Partial Dacryoadenectomy
➡	0923	Total Dacryoadenectomy
	093	Other Operations Lacrimal Gland
➡	0941	Probing Of Lacrimal Punctum
➡	0942	Probing Of Lacrimal Canaliculi
➡	0943	Probing Of Nasolacrimal Duct
➡	0944	Intubation Of Nasolacrimal Duct
➡	0949	Oth Manipulatn Lacrimal Passage
➡	0951	Incision Of Lacrimal Punctum
➡	0952	Incision Of Lacrimal Canaliculi
➡	0953	Incision Of Lacrimal Sac

	Code #	Description
➡	0959	Oth Incision Lacrimal Passages
➡	096	Excision Lacrimal Sac/Passage
➡	0971	Correction Of Everted Punctum
➡	0972	Other Repair Of Punctum
➡	0973	Repair Of Canaliculus
➡	0981	Dacryocystorhinostomy
➡	0982	Conjunctivocystorhinostomy
➡	0983	Conjunctivorhinost/Insert Tube
➡	0991	Obliteration Lacrimal Punctum
➡	0999	Oth Operations Lacrimal System
➡	100	Remov Embedd Fb Conjunct Incis
➡	101	Other Incision Of Conjunctiva
➡	1021	Biopsy Of Conjunctiva
	1029	Other Dx Procedures Conjunctiva
➡	1031	Excision Les/Tissue Conjunctiva
➡	1032	Destruction Lesion Conjunctiva
➡	1033	Other Destruct Proc Conjunctiva
➡	1041	Repair Symblepharon Free Graft
	1042	Reconst Conjunct Cul-De-Sac/Grf
	1043	Oth Reconst Conjunct Cul-De-Sac
➡	1044	Other Free Graft To Conjunctiva
➡	1049	Other Conjunctivoplasty
➡	105	Lysis Adhes Conjunctiva/Eyelid
➡	106	Repair Laceration Conjunctiva
➡	1091	Subconjunctival Injection
➡	1099	Other Operations On Conjunctiva
	110	Magnetic Remov Embedd Fb Cornea
➡	111	Incision Of Cornea
➡	1121	Scraping Cornea Smear/Culture
➡	1122	Biopsy Of Cornea

	Code #	Description
➡	1129	Other Dx Procedures On Cornea
➡	1131	Transposition Of Pterygium
➡	1132	Excis Pterygium W Corneal Grf
➡	1139	Other Excision Of Pterygium
➡	1141	Mech Removal Corneal Epithelium
➡	1142	Thermocauterization Corneal Les
	1143	Cryotherapy Of Corneal Lesion
➡	1149	Oth Remov/Destruct Corneal Les
➡	1151	Suture Of Corneal Laceration
➡	1152	Repr Postop Wound Dehisc Cornea
➡	1153	Repr Corneal Lacn/Wound W Flap
➡	1159	Other Repair Of Cornea
➡	1160	Corneal Transplant Nos
➡	1161	Lamellar Keratoplasty W Autogrf
➡	1162	Other Lamellar Keratoplasty
	1163	Penetrat Keratoplasty W Autogrf
➡	1164	Other Penetrating Keratoplasty
➡	1169	Other Corneal Transplant
	1171	Keratomeleusis
	1172	Keratophakia
	1173	Keratoprosthesis
	1174	Thermokeratoplasty
➡	1175	Radial Keratotomy
➡	1176	Epikeratophakia
➡	1179	Oth Reconst/Refract Surg Cornea
	1191	Tattooing Of Cornea
➡	1192	Removal Artific Implant Cornea
➡	1199	Other Operations On Cornea
➡	1200	Removal Intraoc Fb Ant Eye Nos
➡	1201	Remov Intraoc Fb Ant Eye/Magnet

	Code #	Description
➡	1202	Remov Intraoc Fb Ant Eye/No Mag
➡	1211	Iridotomy With Transfixion
➡	1212	Other Iridotomy
➡	1213	Excision Of Prolapsed Iris
➡	1214	Other Iridectomy
➡	1221	Dx Aspirat Anterior Chamber Eye
	1222	Biopsy Of Iris
➡	1229	Oth Dx Proc Iris/Cil/Sclera/Ant
	1231	Lysis Of Goniosynechiae
➡	1232	Lysis Other Anterior Synechiae
➡	1233	Lysis Of Posterior Synechiae
➡	1234	Lysis Corneovitreal Adhesions
➡	1235	Coreoplasty
➡	1239	Other Iridoplasty
➡	1240	Removal Lesion Anterior Eye Nos
➡	1241	Destruction Les Iris Nonexcis
➡	1242	Excision Of Lesion Of Iris
➡	1243	Destr Les Ciliary Body Nonexcis
➡	1244	Excision Of Lesion Ciliary Body
	1251	Goniopuncture Without Goniotomy
	1252	Goniotomy Without Goniopuncture
	1253	Goniotomy With Goniopuncture
➡	1254	Trabeculotomy Ab Externo
	1255	Cyclodialysis
➡	1259	Oth Facilitatn Intraocular Circ
	1261	Trephinatn Sclera W Iridectomy
➡	1262	Thermocauter Sclera Iridectomy
	1263	Iridencleisis And Iridotasis
➡	1264	Trabeculectomy Ab Externo
➡	1265	Oth Scleral Fistuliz W Iridect

	Code #	Description
➡	1266	Postop Revisn Scleral Fistuliz
➡	1269	Other Fistulizing Procedure
➡	1271	Cyclodiathermy
➡	1272	Cyclocryotherapy
➡	1273	Cyclophotocoagulation
➡	1274	Diminution Of Ciliary Body Nos
➡	1279	Other Glaucoma Procedures
➡	1281	Suture Of Laceration Of Sclera
➡	1282	Repair Of Scleral Fistula
	1283	Revisn Op Wound Ant Segment NEC
➡	1284	Excis/Destruction Lesion Sclera
	1285	Repair Scleral Staphyloma W Grf
	1286	Other Repair Scleral Staphyloma
➡	1287	Scleral Reinforcement W Graft
➡	1288	Other Scleral Reinforcement
➡	1289	Other Operations On Sclera
➡	1291	Ther Evacuatn Anterior Chamber
➡	1292	Injection Into Anterior Chamber
➡	1293	Remov Epith Downgrow Ant Chamb
➡	1297	Other Operations On Iris
➡	1298	Other Operations Ciliary Body
➡	1299	Oth Operations Anterior Chamber
➡	1300	Removal Foreign Body Lens Nos
	1301	Removal Fb From Lens W Magnet
➡	1302	Removal Fb From Lens No Magnet
➡	1311	Intracaps Extrc Lens Temp Infer
➡	1319	Oth Intracapsular Extract Lens
➡	132	Extracaps Extract Lens Linear
➡	133	Extracaps Extract Lens Aspirat
➡	1341	Phacoemulsificat/Aspir Cataract

	Code #	**Description**
➡	1342	Mech Phacofrag/Post Aspir Catar
➡	1343	Mech Phacofrag/Oth Aspir Catar
➡	1351	Extracaps Extrc Lens Temp Infer
➡	1359	Oth Extracapsular Extract Lens
➡	1364	Discission Secondary Membrane
➡	1365	Excision Secondary Membrane
➡	1366	Mech Fragment Second Membrane
➡	1369	Other Cataract Extraction
➡	1370	Insertion Of Pseudophakos Nos
➡	1371	Insrt Lens Prosth W Cat Extract
➡	1372	Secondary Insertion Lens Prosth
➡	138	Removal Of Implanted Lens
➡	139	Other Operations On Lens
	1400	Removal Fb Post Segment Eye Nos
	1401	Remov Fb Post Seg Eye W Magnet
	1402	Remov Fb Post Seg Eye No Magnet
➡	1411	Diagnostic Aspiration Vitreous
➡	1419	Oth Dx Ret/Chor/Vitreous/Post
➡	1421	Destr Chorioretinal Les Diath
➡	1422	Destr Chorioret Lesion Cryother
➡	1423	Destr Chorioret Les Xenon Arc
➡	1424	Destr Chorioretinal Les Laser
➡	1425	Destr Chorioret Lesion Phot Nos
➡	1426	Destr Chorioret Les Radiation
➡	1427	Destr Chorioret Les Rad Implant
➡	1429	Oth Destruct Chorioretinal Les
➡	1431	Repair Retinal Tear W Diathermy
➡	1432	Repair Retinal Tear W Cryother
➡	1433	Repair Retinal Tear W Xenon Arc
➡	1434	Repr Retinal Tear W Laser Phot

	Code #	Description
➡	1435	Repr Retinal Tear W Unspec Phot
➡	1439	Other Repair Of Retinal Tear
➡	1441	Scleral Buckling With Implant
➡	1449	Other Scleral Buckling
	1451	Repr Retinal Detach W Diathermy
➡	1452	Repr Retinal Detach W Cryother
	1453	Repr Retinal Detach W Xenon Arc
➡	1454	Repr Retin Detach W Laser Phot
	1455	Repr Retin Detach W Unspec Phot
➡	1459	Other Repair Of Retinal Detach
➡	146	Remov Surg Implant Post Segment
➡	1471	Removal Vitreous Ant Approach
➡	1472	Other Removal Of Vitreous
➡	1473	Mech Vitrectomy Ant Approach
➡	1474	Other Mechanical Vitrectomy
➡	1475	Injection Vitreous Substitute
➡	1479	Other Operations On Vitreous
➡	149	Oth Op Ret/Choroid/Post Chamber
➡	1501	Biopsy Extraocular Muscle/Tend
	1509	Oth Dx Proc Extraoc Muscle/Tend
➡	1511	Recession One Extraocular Musc
➡	1512	Advancement One Extraoc Muscle
➡	1513	Resection One Extraocular Musc
➡	1519	Oth Op One Extraoc Musc/Detach
➡	1521	Lengthen Proc One Extraoc Musc
➡	1522	Shorten Proc One Extraoc Muscle
➡	1529	Other Op One Extraocular Muscle
➡	153	Op Two/More Extraoc Musc/Detach
➡	154	Oth Op Two/More Extraoc Muscles
➡	155	Transposition Extraocular Musc

	Code #	Description
➡	156	Revision Extraocular Musc Surg
➡	157	Repr Injury Extraocular Muscle
➡	159	Oth Op Extraoc Muscles/Tendons
	1601	Orbitotomy With Bone Flap
➡	1602	Orbitotomy W Insert Orb Implant
➡	1609	Other Orbitotomy
➡	161	Removal Penetrating Fb Eye Nos
➡	1621	Ophthalmoscopy
➡	1622	Diagnostic Aspiration Of Orbit
➡	1623	Biopsy Of Eyeball And Orbit
	1629	Oth Dx Procedures Orbit/Eyeball
➡	1631	Remov Ocular Contents W Implant
➡	1639	Other Evisceration Of Eyeball
➡	1641	Enucleat Eyeball W Impl Tenon's
➡	1642	Enucleat Eyeball W Oth Implant
➡	1649	Other Enucleation Of Eyeball
➡	1651	Exenterat Orb/Remov Adjac Struc
	1652	Exenterat Orbit W Removal Bone
➡	1659	Other Exenteration Of Orbit
➡	1661	Secondary Insert Ocular Implant
➡	1662	Revisn/Reinsertin Ocular Implant
➡	1663	Revis Enucleation Socket/Graft
➡	1664	Oth Revision Enucleation Socket
➡	1665	Second Graft Exenteration Cav
➡	1666	Other Revision Exenteration Cav
➡	1669	Oth Second Proc After Remov Eye
➡	1671	Removal Of Ocular Implant
➡	1672	Removal Of Orbital Implant
➡	1681	Repair Of Wound Of Orbit
➡	1682	Repair Of Rupture Of Eyeball

	Code #	Description
➡	1689	Oth Repair Injury Eyeball/Orbit
➡	1691	Retrobulbar Injectn Ther Agent
➡	1692	Excision Of Lesion Of Orbit
➡	1693	Excision Lesion Eye Struct Nos
➡	1698	Other Operations On Orbit
➡	1699	Other Operations On Eyeball
	1801	Piercing Of Ear Lobe
➡	1802	Incis External Auditory Canal
➡	1809	Other Incision Of External Ear
	1811	Otoscopy
➡	1812	Biopsy Of External Ear
	1819	Oth Dx Procedures External Ear
➡	1821	Excision Of Preauricular Sinus
➡	1829	Excisn/Destruct Oth Les Ext Ear
➡	1831	Radical Excisn Les External Ear
➡	1839	Other Excision Of External Ear
➡	184	Suture Laceration External Ear
➡	185	Surgical Correctn Prominent Ear
➡	186	Reconstruct Ext Auditory Canal
➡	1871	Construction Of Auricle Of Ear
	1872	Reattachment Of Amputated Ear
➡	1879	Oth Plastic Repair External Ear
➡	189	Other Operations External Ear
➡	190	Stapes Mobilization
➡	1911	Stapedectomy With Incus Replace
➡	1919	Other Stapedectomy
➡	1921	Revis Stapedect W Incus Replace
➡	1929	Other Revision Of Stapedectomy
➡	193	Oth Operations Ossicular Chain
➡	194	Myringoplasty

	Code #	Description
➡	1952	Type Ii Tympanoplasty
➡	1953	Type Iii Tympanoplasty
➡	1954	Type Iv Tympanoplasty
➡	1955	Type V Tympanoplasty
➡	196	Revision Of Tympanoplasty
➡	199	Other Repair Of Middle Ear
➡	2001	Myringotomy With Insertion Tube
➡	2009	Other Myringotomy
➡	201	Removal Of Tympanostomy Tube
➡	2021	Incision Of Mastoid
	2022	Incis Petrous Pyramid Air Cells
➡	2023	Incision Of Middle Ear
	2031	Electrocochleography
➡	2032	Biopsy Of Middle And Inner Ear
➡	2039	Other Dx Proc Middle/Inner Ear
➡	2041	Simple Mastoidectomy
➡	2042	Radical Mastoidectomy
➡	2049	Other Mastoidectomy
➡	2051	Excision Of Lesion Middle Ear
➡	2059	Other Excision Of Middle Ear
	2061	Fenestration Of Inner Ear
➡	2062	Revision Fenestration Inner Ear
	2071	Endolymphatic Shunt
	2072	Injection Into Inner Ear
➡	2079	Oth Incis/Excis/Destr Inner Ear
➡	208	Operations On Eustachian Tube
➡	2091	Tympanosympathectomy
➡	2092	Revision Of Mastoidectomy
➡	2093	Repair Oval And Round Windows
	2094	Injection Of Tympanum

	Code #	Description
➡	2095	Implant Electromagnet Hear Aid
➡	2096	Impl/Replac Cochlear Prosth Nos
➡	2097	Impl/Replac Cochl Prosth Single
➡	2098	Impl/Replac Cochlea Prosth Mult
➡	2099	Oth Operations Middle/Inner Ear
➡	2100	Control Of Epistaxis Nos
➡	2101	Contr Epistaxis Ant Nasal Pack
➡	2102	Contr Epistaxis Post Nasal Pack
➡	2103	Control Epistaxis Cauterization
➡	2104	Contr Epistax Ligat Ethmoid Art
	2105	Contr Epistaxis Ligat Maxil Art
	2106	Contr Epistax Ligat Ext Carotid
	2107	Contr Epistax Excis Nasl Mucosa
➡	2109	Other Control Of Epistaxis
➡	211	Incision Of Nose
➡	2121	Rhinoscopy
➡	2122	Biopsy Of Nose
	2129	Other Dx Procedures On Nose
➡	2130	Excisn/Destruct Lesion Nose Nos
➡	2131	Local Excis/Destr Intranasl Les
➡	2132	Local Excis/Destr Oth Les Nose
➡	214	Resection Of Nose
➡	215	Submucous Resect Nasal Septum
➡	2161	Turbinectomy Diathermy/Cryosurg
➡	2162	Fracture Of The Turbinates
➡	2169	Other Turbinectomy
➡	2171	Closed Reduction Nasal Fracture
➡	2172	Open Reduction Nasal Fracture
➡	2181	Suture Of Laceration Of Nose
➡	2182	Closure Of Nasal Fistula

	Code #	Description
➡	2183	Total Nasal Reconstruction
➡	2184	Revision Rhinoplasty
➡	2185	Augmentation Rhinoplasty
➡	2186	Limited Rhinoplasty
➡	2187	Other Rhinoplasty
➡	2188	Other Septoplasty
➡	2189	Oth Repair/Plastic Operat Nose
➡	2191	Lysis Of Adhesions Of Nose
➡	2199	Other Operations On Nose
➡	2200	Aspiratn/Lavage Nasal Sinus Nos
➡	2201	Punct Nasal Sinus Aspir/Lavage
➡	2202	Aspir/Lav Nas Sinus Thru Ostium
➡	2211	Closed Biopsy Of Nasal Sinus
➡	2212	Open Biopsy Of Nasal Sinus
➡	2219	Other Dx Proc On Nasal Sinuses
➡	222	Intranasal Antrotomy
➡	2231	Radical Maxillary Antrotomy
➡	2239	Other Ext Maxillary Antrotomy
➡	2241	Frontal Sinusotomy
	2242	Frontal Sinusectomy
➡	2250	Sinusotomy Nos
➡	2251	Ethmoidotomy
➡	2252	Sphenoidotomy
➡	2253	Incision Multiple Nasal Sinuses
➡	2260	Sinusectomy Nos
➡	2261	Excis Les Maxil Sin Caldwel-Luc
➡	2262	Excis Les Maxil Sin Oth Apprch
➡	2263	Ethmoidectomy
➡	2264	Sphenoidectomy
➡	2271	Closure Of Nasal Sinus Fistula

	Code #	Description
➡	2279	Other Repair Of Nasal Sinus
➡	229	Other Operations Nasal Sinuses
➡	2301	Extraction Of Deciduous Tooth
➡	2309	Extraction Of Other Tooth
➡	2311	Removal Of Residual Root
➡	2319	Other Surgical Extraction Tooth
➡	232	Restoration Of Tooth By Filling
➡	233	Restoration Of Tooth By Inlay
➡	2341	Application Of Crown
➡	2342	Insertion Of Fixed Bridge
	2343	Insertion Of Removable Bridge
➡	2349	Other Dental Restoration
➡	235	Implantation Of Tooth
➡	236	Prosthetic Dental Implant
➡	2370	Root Canal Nos
➡	2371	Root Canal Therapy W Irrigation
➡	2372	Root Canal Therapy/Apicoectomy
➡	2373	Apicoectomy
➡	240	Incision Of Gum/Alveolar Bone
➡	2411	Biopsy Of Gum
➡	2412	Biopsy Of Alveolus
	2419	Oth Dx Proc Teeth/Gums/Alveoli
➡	242	Gingivoplasty
➡	2431	Excision Lesion/Tissue Of Gum
➡	2432	Suture Of Laceration Of Gum
	2439	Other Operations On Gum
➡	244	Excision Of Dental Lesion Jaw
➡	245	Alveoloplasty
➡	246	Exposure Of Tooth
➡	247	Applicatn Orthodontic Appliance

	Code #	Description
➡	248	Other Orthodontic Operation
➡	2491	Extens/Deepen Bucco/Ling Sulcus
➡	2499	Other Dental Operations
➡	2501	Closed Biopsy Of Tongue
➡	2502	Open Biopsy Of Tongue
	2509	Other Dx Procedures Tongue
➡	251	Excisn/Destruct Les/Tiss Tongue
➡	252	Partial Glossectomy
	253	Complete Glossectomy
	254	Radical Glossectomy
➡	2551	Suture Of Laceration Of Tongue
➡	2559	Other Repair/Plastic Op Tongue
➡	2591	Lingual Frenotomy
➡	2592	Lingual Frenectomy
➡	2593	Lysis Of Adhesions Of Tongue
➡	2594	Other Glossotomy
➡	2599	Other Operations On Tongue
➡	260	Incision Of Salivary Gland/Duct
➡	2611	Closed Biopsy Salivary Gl/Duct
➡	2612	Open Biopsy Salivary Gland/Duct
➡	2619	Oth Dx Proc Salivary Gland/Duct
➡	2621	Marsupializatn Salivary Gl Cyst
➡	2629	Oth Excis Salivary Gland Lesion
➡	2630	Sialoadenectomy Nos
➡	2631	Partial Sialoadenectomy
➡	2632	Complete Sialoadenectomy
	2641	Suture Laceratn Salivary Gland
	2642	Closure Of Salivary Fistula
➡	2649	Oth Repr/Plast Op Saliv Gl/Duct
➡	2691	Probing Of Salivary Duct

	Code #	Description
➡	2699	Oth Operat Salivary Gland/Duct
➡	270	Drainage Of Face/Floor Of Mouth
➡	271	Incision Of Palate
➡	2721	Biopsy Of Bony Palate
➡	2722	Biopsy Of Uvula And Soft Palate
➡	2723	Biopsy Of Lip
➡	2724	Biopsy Mouth Unspec Structure
	2729	Other Dx Procedures Oral Cavity
➡	2731	Loc Excis/Destr Les Bony Palate
➡	2732	Wide Excs/Destr Les Bony Palate
➡	2741	Labial Frenectomy
➡	2742	Wide Excision Of Lesion Of Lip
➡	2743	Oth Excision Lesion/Tissue Lip
➡	2749	Other Excision Of Mouth
➡	2751	Suture Of Laceration Of Lip
➡	2752	Suture Laceratn Oth Part Mouth
➡	2753	Closure Of Fistula Of Mouth
➡	2754	Repair Of Cleft Lip
➡	2755	Full-Thick Skin Graft Lip/Mouth
➡	2756	Other Skin Graft To Lip/Mouth
➡	2757	Attach Ped/Flap Graft Lip/Mouth
➡	2759	Other Plastic Repair Of Mouth
➡	2761	Suture Of Laceration Of Palate
➡	2762	Correction Of Cleft Palate
➡	2763	Revision Of Cleft Palate Repair
➡	2769	Other Plastic Repair Of Palate
➡	2771	Incision Of Uvula
➡	2772	Excision Of Uvula
➡	2773	Repair Of Uvula
➡	2779	Other Operations On Uvula

	Code #	Description
➡	2791	Labial Frenotomy
➡	2792	Incision Mouth Unspec Structure
➡	2799	Other Operations On Oral Cavity
➡	280	Incis/Drain Tonsil/Peritonsil
➡	2811	Biopsy Of Tonsils And Adenoids
	2819	Other Dx Proc Tonsils/Adenoids
➡	282	Tonsillectomy No Adenoidectomy
➡	283	Tonsillectomy W Adenoidectomy
➡	284	Excision Of Tonsil Tag
➡	285	Excision Of Lingual Tonsil
➡	286	Adenoidectomy No Tonsillectomy
➡	287	Contr Hem Aft Tonsil/Adenoidect
	2891	Removal Fb Tonsil/Adenoid Incis
➡	2892	Excision Lesion Tonsil/Adenoid
➡	2899	Oth Operations Tonsils/Adenoids
➡	290	Pharyngotomy
➡	2911	Pharyngoscopy
➡	2912	Pharyngeal Biopsy
	2919	Other Dx Procedures On Pharynx
➡	292	Excis Branch Cleft Cyst/Vestige
	2931	Cricopharyngeal Myotomy
	2932	Pharyngeal Diverticulectomy
	2933	Pharygectomy (Partial)
➡	2939	Oth Exc/Dest Les Or Tis Pharynx
➡	294	Plastic Operation On Pharynx
	2951	Suture Of Laceration Of Pharynx
➡	2952	Closure Branchial Cleft Fistula
	2953	Closure Other Fistula Pharynx
➡	2954	Lysis Of Pharyngeal Adhesions
	2959	Other Repair Of Pharynx

	Code #	Description
➡	2991	Dilation Of Pharynx
	2992	Division Glossopharyngeal Nerve
➡	2999	Other Operations On Pharynx
➡	3001	Marsupialization Laryngeal Cyst
➡	3009	Oth Excis/Destr Les/Tiss Larynx
	301	Hemilaryngectomy
	3021	Epiglottidectomy
➡	3022	Vocal Cordectomy
➡	3029	Other Partial Laryngectomy
	303	Complete Laryngectomy
	304	Radical Laryngectomy
➡	310	Injection Of Larynx
➡	311	Temporary Tracheostomy
	3121	Mediastinal Tracheostomy
➡	3129	Other Permanent Tracheostomy
➡	313	Other Incision Larynx/Trachea
➡	3141	Tracheoscopy Thru Artific Stoma
➡	3142	Laryngoscopy/Other Tracheoscopy
➡	3143	Closed Biopsy Of Larynx
➡	3144	Closed Biopsy Of Trachea
➡	3145	Open Biopsy Of Larynx/Trachea
	3148	Other Dx Procedures On Larynx
	3149	Other Dx Procedures On Trachea
➡	315	Loc Excis/Destr Les/Tis Trachea
	3161	Suture Of Laceration Of Larynx
	3162	Closure Of Fistula Of Larynx
	3163	Revision Of Laryngostomy
	3164	Repair Of Laryngeal Fracture
➡	3169	Other Repair Of Larynx
	3171	Suture Of Laceration Of Trachea

	Code #	Description
➡	3172	Clos External Fistula Trachea
➡	3173	Closure Other Fistula Trachea
➡	3174	Revision Of Tracheostomy
➡	3175	Recon Trach/Constr Artif Larynx
➡	3179	Other Repair/Plastic Op Trachea
	3191	Division Of Laryngeal Nerve
➡	3192	Lysis Adhesions Trachea/Larynx
➡	3193	Replac Laryngeal/Tracheal Stent
	3194	Inject Local Ther Subst Trachea
➡	3195	Tracheoesophageal Fistulization
➡	3198	Other Operations On Larynx
➡	3199	Other Operations On Trachea
➡	3201	Endo Excis/Destr Les/Tis Bronch
➡	3209	Oth Loc Excis/Destr Les Bronch
	321	Other Excision Of Bronchus
	3221	Plication Of Emphysematous Bleb
➡	3222	Lung Volume Reduction Surgery
➡	3228	Endo Excis/Destr Les/Tiss Lung
➡	3229	Oth Loc Exc/Destr Les/Tiss Lung
	323	Segmental Resection Of Lung
	324	Lobectomy Of Lung
	325	Complete Pneumonectomy
	326	Radical Dissect Thoracic Struct
	329	Other Excision Of Lung
	330	Incision Of Bronchus
➡	331	Incision Of Lung
➡	3321	Bronchoscopy Thru Artific Stoma
➡	3322	Fiberoptic Bronchoscopy
➡	3323	Other Bronchoscopy
➡	3324	Closed Endoscopic Bronchial Bx

	Code #	Description
➡	3325	Open Biopsy Of Bronchus
➡	3326	Cl Percutaneous Biopsy Of Lung
➡	3327	Closed Endoscopic Biopsy Lung
➡	3328	Open Biopsy Of Lung
➡	3329	Other Dx Procedures Lung/Bronch
	3331	Destr Phrenic Nrv/Collapse Lung
	3332	Artif Pneumothor/Collapse Lung
	3333	Pneumoperitoneum/Collapse Lung
	3334	Thoracoplasty
	3339	Other Surgical Collapse Of Lung
	3341	Suture Of Laceration Bronchus
	3342	Closure Of Bronchial Fistula
	3343	Closure Of Laceration Of Lung
	3348	Oth Repair/Plastic Op Bronchus
	3349	Other Repair/Plastic Op On Lung
	3350	Lung Transplantation, Not Otherwise Specified
	3351	Unilateral Lung Transplantation
	3352	Bilateral Lung Transplantation
	336	Combined Heart-Lung Transplant
	3391	Bronchial Dilation
	3392	Ligation Of Bronchus
➡	3393	Puncture Of Lung
	3398	Other Operations On Bronchus
	3399	Other Operations On Lung
➡	3401	Incision Of Chest Wall
	3402	Exploratory Thoracotomy
	3403	Reopen Recent Thoracotomy Site
➡	3404	Insert Intercostal Cath Drain
	3405	Creation Pleuroperitoneal Shunt
	3409	Other Incision Of Pleura

	Code #	Description
➨	341	Incision Of Mediastinum
➨	3421	Transpleural Thoracoscopy
➨	3422	Mediastinoscopy
➨	3423	Biopsy Of Chest Wall
➨	3424	Pleural Biopsy
➨	3425	Closed Biopsy Of Mediastinum
➨	3426	Open Mediastinal Biopsy
	3427	Biopsy Of Diaphragm
	3428	Oth Dx Proc Chest/Pleur/Diaphrm
	3429	Other Dx Procedures Mediastinum
	343	Excis/Destr Les/Tis Mediastinum
➨	344	Excis/Destr Lesion Chest Wall
	3451	Decortication Of Lung
	3459	Other Excision Of Pleura
	346	Scarification Of Pleura
	3471	Suture Of Laceration Chest Wall
	3472	Closure Of Thoracostomy
➨	3473	Closure Of Other Fistula Thorax
➨	3474	Repair Of Pectus Deformity
➨	3479	Other Repair Of Chest Wall
	3481	Excision Lesion/Tiss Diaphragm
	3482	Suture Laceration Of Diaphragm
	3483	Closure Of Fistula Of Diaphragm
	3484	Other Repair Of Diaphragm
	3485	Implant Diaphragmatic Pacemaker
	3489	Other Operations On Diaphragm
➨	3491	Thoracentesis
	3492	Injection Into Thoracic Cavity
	3493	Repair Of Pleura
	3499	Other Operations On Thorax

	Code #	Description
	3500	Closed Heart Valvotomy Unspec
	3501	Closed Heart Valvotomy Aortic
	3502	Closed Heart Valvotomy Mitral
	3503	Closed Heart Valvotomy Pulmon
	3504	Closed Heart Valvotomy Tricusp
	3510	Op Valvuloplasty No Replace Nos
	3511	Op Valvuloplasty Aortic No Repl
	3512	Op Valvuloplasty Mitral No Repl
	3513	Op Valvuloplasty Pulm No Replac
	3514	Op Valvuloplsty Tricusp No Repl
	3520	Replacement Unspec Heart Valve
	3521	Replace Aortic Valve W Tiss Grf
	3522	Other Replacement Aortic Valve
	3523	Replace Mitral Valve W Tiss Grf
	3524	Other Replacement Mitral Valve
	3525	Replace Pulm Valve W Tiss Graft
	3526	Oth Replacement Pulmonary Valve
	3527	Replac Tricusp Valve W Tiss Grf
	3528	Oth Replacement Tricuspid Valve
	3531	Operations On Papillary Muscle
	3532	Operations On Chordae Tendineae
	3533	Annuloplasty
	3534	Infundibulectomy
	3535	Op On Trabeculae Carneae Cordis
	3539	Op Oth Struct Adjac Heart Valve
	3541	Enlargement Atrial Sept Defect
	3542	Creation Of Septal Defect Heart
	3550	Repr Septal Defect Nos W Prosth
	3551	Op Repr Atrial Sept Def Prosth
	3552	Cl Repr Atrial Sept Def Prosth

	Code #	Description
	3553	Repr Vent Sept Defect W Prosth
	3554	Repr Endocard Cush Def W Prosth
	3560	Repr Unspec Sept Def W Tiss Grf
	3561	Repr Atrial Sept Def W Tiss Grf
	3562	Repr Vent Septal Def W Tiss Grf
	3563	Repr Endocard Cush Def Tiss Grf
	3570	Oth/Unspec Repr Unspec Sept Def
	3571	Oth/Unspec Repr Atrial Sept Def
	3572	Oth/Unspec Repr Vent Septal Def
	3573	Oth/Nos Repr Endocard Cush Def
	3581	Total Repair Tetralogy Fallot
	3582	Tot Repr Anom Pulm Ven Connect
	3583	Total Repair Truncus Arteriosus
	3584	Tot Correct Transpos Grt Vessel
	3591	Interatrial Transpos Ven Return
	3592	Creat Conduit R Vent/Pulm Art
	3593	Creat Conduit L Ventricle/Aorta
	3594	Creat Conduit Atrium/Pulm Art
	3595	Revision Corrective Proc Heart
➡	3596	Percutaneous Valvuloplasty
	3598	Other Operations On Septa Heart
	3599	Other Operations Valves Heart
➡	3601	Single Ptca No Thrombolyt Agent
➡	3602	Single Ptca W Thrombolyt Agent
	3603	Op Coronary Artery Angioplasty
	3604	Intracor Art Thrombolytic Infus
➡	3605	Mult Vess Ptca Same Op Episode
	3606	Insertion Of Coronary Artery Stent(S)
	3609	Oth Remov Coronary Art Obstruct
	3610	Aortocoronary Bypass Revasc Nos

	Code #	Description
	3611	Aortocor Bypass 1 Coronary Art
	3612	Aortocor Bypass 2 Coronary Art
	3613	Aortocor Bypass 3 Coronary Art
	3614	Aortocor Bypass 4 Coronary Art
	3615	Sing Mammary-Coronary Art Bypas
	3616	Doub Mammary-Coronary Art Bypas
	3617	Abdominal-Coronary Art Bypas
	3619	Other Bypass Anast Heart Revasc
	362	Heart Revasc Arterial Implant
	3631	Open Chest Transmyocardial Revascularization
	3632	Other Transmyocardial Revascularization
	3639	Other Heart Revascularization
	3691	Repair Aneurysm Coronary Vessel
	3699	Other Operation Vessels Heart
➡	370	Pericardiocentesis
	3710	Incision Of Heart Nos
	3711	Cardiotomy
	3712	Pericardiotomy
➡	3721	R Heart Cardiac Catheterization
➡	3722	L Heart Cardiac Catheterization
➡	3723	Combin R/L Card Catheterization
	3724	Biopsy Of Pericardium
➡	3725	Biopsy Of Heart
➡	3726	Cardiac Electrophys Stim Study
➡	3727	Cardiac Mapping
➡	3729	Other Dx Proc Heart/Pericardium
	3731	Pericardiectomy
	3732	Excision Of Aneurysm Of Heart
	3733	Excisn/Destr Oth Les/Tiss Heart
➡	3734	Cath Ablation Lesion/Tiss Heart

	Code #	Description
	3735	Partial Ventriculectomy
	374	Repair Of Heart And Pericardium
	375	Heart Transplant
	3761	Implant Of Pulsation Balloon
	3762	Implant Oth Heart Assist System
	3763	Replace/Repair Heart Assist Sys
	3764	Removal Of Heart Assist System
	3765	Implant Of External Pulsatile Heart Assist
	3766	Implant Pulsatile Heart Assist System
	3767	Implantation Of Cardiomyostimulation System
➡	3770	Init Insert Pacemaker Lead Nos
➡	3771	Init Insert Transven Lead Vent
➡	3772	Init Insrt Transv Lead Atr/Vent
➡	3773	Init Insrt Transven Lead Atrium
➡	3774	Insrt/Repl Epicard Lead Epicard
➡	3775	Revision Of Lead
➡	3776	Replac Transven Atr/Vent Leads
➡	3777	Removal Lead(S) Without Replace
➡	3778	Insert Temp Transven Pacemaker
➡	3779	Revis/Relocat Pacemaker Pocket
➡	3780	Insert Perm Pacemaker Type Nos
➡	3781	Init Insrt Sing-Chamb Dev Nos
➡	3782	Init Insrt Sing-Chamb/Rate Resp
➡	3783	Init Insert Dual-Chamber Device
➡	3785	Replac Pacmkr W Sing-Chamb Nos
➡	3786	Repl Pacmkr Sing-Cham/Rate Resp
➡	3787	Replac Pacmkr W Dual-Chamb Dev
➡	3789	Revisn/Removal Pacemaker Device
	3791	Open Chest Cardiac Massage
	3792	Injection Ther Subst Into Heart

	Code #	Description
	3793	Injectn Ther Subst Pericardium
	3794	Impl/Repl Auto Cardiovert/Defib
➡	3795	Impl Auto Cardiovert/Defib Lead
➡	3796	Impl Auto Cardiovert/Defib Genr
➡	3797	Repl Auto Cardiovert/Defib Lead
➡	3798	Repl Auto Cardiovert/Defib Genr
	3799	Other Operat Heart/Pericardium
➡	3800	Incision Of Vessel Unspec Site
	3801	Incision Intracranial Vessels
➡	3802	Incision Oth Vessels Head/Neck
➡	3803	Incision Upper Limb Vessels
	3804	Incision Of Aorta
➡	3805	Incision Other Thoracic Vessels
➡	3806	Incision Abdominal Arteries
	3807	Incision Abdominal Veins
➡	3808	Incision Lower Limb Arteries
➡	3809	Incision Lower Limb Veins
	3810	Endarterectomy Unspecified Site
	3811	Endarterectomy Intracran Vessel
	3812	Endarterect Oth Vess Head/Neck
	3813	Endarterectomy Upper Limb Vess
	3814	Endarterectomy Of Aorta
	3815	Endarterectomy Oth Thorac Vess
	3816	Endarterectomy Abdominal Artery
	3818	Endarterect Lower Limb Artery
➡	3821	Biopsy Of Blood Vessel
➡	3822	Percutaneous Angioscopy
➡	3829	Oth Dx Procedures Blood Vessels
	3830	Resect Vess Unspec Site W Anast
	3831	Resect Intracran Vess W Anast

	Code #	Description
	3832	Resect Oth Vess Hd/Neck W Anast
➡	3833	Resect Upper Limb Vess W Anast
	3834	Resection Aorta W Anastomosis
	3835	Resect Oth Thorac Vess W Anast
	3836	Resect Abdominal Artery W Anast
	3837	Resect Abdominal Veins W Anast
➡	3838	Resect Lower Limb Art W Anast
➡	3839	Resect Lower Limb Vein W Anast
	3840	Resect Vess Unspec Site W Repl
	3841	Resect Intracran Vess W Replace
	3842	Resect Oth Vess Hd/Neck W Repl
➡	3843	Resect Upp Limb Vess W Replace
	3844	Resection Abd Aorta With Replac
	3845	Resect Thoracic Vess W Replace
	3846	Resect Abdominal Art W Replace
	3847	Resect Abdominal Veins W Replac
	3848	Resect Lower Limb Art W Replace
	3849	Resect Lower Limb Vein W Replac
➡	3850	Lig/Strip Varic Vein Site Nos
	3851	Lig/Strip Intracran Varic Vein
➡	3852	Lig/Strip Head/Neck Varic Vein
	3853	Lig/Strip Upp Limb Varic Vein
	3855	Lig/Strip Thoracic Varic Vein
	3857	Lig/Strip Abdominal Varic Vein
➡	3859	Lig/Strip Lower Limb Varic Vein
➡	3860	Oth Excision Vessel Unspec Site
	3861	Oth Excision Intracranial Vess
➡	3862	Oth Excision Oth Vess Head/Neck
➡	3863	Oth Excision Upper Limb Vessels
	3864	Other Excision Of Aorta

	Code #	Description
	3865	Oth Excision Oth Thoracic Vess
	3866	Oth Excision Abdominal Arteries
	3867	Other Excision Abdominal Veins
➡	3868	Oth Excision Low Limb Arteries
➡	3869	Other Excision Lower Limb Veins
	387	Interruption Of Vena Cava
➡	3880	Oth Surg Occlus Vessel Site Nos
	3881	Oth Surg Occlus Intracran Vess
➡	3882	Oth Surg Occlus Oth Hd/Neck Ves
➡	3883	Oth Surg Occlus Upper Limb Vess
	3884	Other Surgical Occlusion Aorta
	3885	Oth Surg Occlus Oth Thorac Vess
	3886	Other Surg Occlus Abdominal Art
➡	3887	Oth Surg Occlus Abdominal Veins
➡	3888	Oth Surg Occlus Lower Limb Art
➡	3889	Oth Surg Occlus Lower Limb Vein
➡	3891	Arterial Catheterization
	3892	Umbilical Vein Catheterization
➡	3893	Venous Catheterization Nec
➡	3894	Venous Cutdown
➡	3895	Venous Cath For Renal Dialysis
➡	3898	Other Puncture Of Artery
	3899	Other Puncture Of Vein
	390	Systemic-Pulmonary Artery Shunt
	391	Intraabdominal Venous Shunt
	3921	Caval-Pulmonary Art Anastomosis
	3922	Aorta-Subclavian-Carotid Bypass
	3923	Oth Intrathoracic Shunt/Bypass
	3924	Aorta-Renal Bypass
	3925	Aorta-Iliac-Femoral Bypass

	Code #	Description
	3926	Oth Intraabdominal Shunt/Bypass
➡	3927	Arteriovenostomy Renal Dialysis
	3928	Extra-Intracranial Vasc Bypass
	3929	Other (Peripheral) Shunt/Bypass
	3930	Suture Unspecified Blood Vessel
➡	3931	Suture Of Artery
➡	3932	Suture Of Vein
	3941	Control Bleeding Foll Vasc Surg
➡	3942	Revis Arterioven Shunt-Dialysis
➡	3943	Remov Arterioven Shunt-Dialysis
➡	3949	Oth Revision Vascular Procedure
➡	3950	Angiopl/Atherect Non-Cor Vessel
➡	3951	Clipping Of Aneurysm
➡	3952	Other Repair Of Aneurysm
➡	3953	Repair Of Arteriovenous Fistula
	3954	Re-Entry Operation (Aorta)
	3955	Reimplant Aberrant Renal Vessel
	3956	Repr Blood Vess/Tiss Patch Grf
	3957	Repr Blood Vess/Synth Patch Grf
➡	3958	Repr Blood Vess W Patch Grf Nos
➡	3959	Other Repair Of Vessel
	3961	Extracorp Circ W Op Heart Surg
	3962	Hypothermia W Open Heart Surg
	3963	Cardioplegia
	3964	Intra-Op Cardiac Pacemaker
	3965	Extracorp Membrane Oxygenation
	3966	Percutaneous Cardiopulm Bypass
	397	Periarterial Sympathectomy
	398	Op Carotid Body/Oth Vasc Bodies
	3990	Insertion Of Non-Coronary Art Stent Or

	Code #	Description
	3991	Freeing Of Vessel
➡	3992	Injection Sclerosing Agent Vein
➡	3993	Insert Vessel-To-Vessel Cannula
➡	3994	Replac Vessel-To-Vessel Cannula
➡	3995	Hemodialysis
	3996	Total Body Perfusion
	3997	Other Perfusion
	3998	Control Of Hemorrhage Nos
➡	3999	Other Operations On Vessels
➡	400	Incision Lymphatic Structures
➡	4011	Biopsy Of Lymphatic Structure
➡	4019	Oth Dx Proc Lymphatic Structure
➡	4021	Excis Deep Cervical Lymph Node
➡	4022	Excision Int Mammary Lymph Node
➡	4023	Excision Of Axillary Lymph Node
➡	4024	Excision Of Inguinal Lymph Node
➡	4029	Simple Excis Other Lymph Struct
➡	403	Regional Lymph Node Excision
	4040	Radical Neck Dissection Nos
	4041	Radical Neck Dissection Unilat
	4042	Radical Neck Dissection Bilat
	4050	Rad Excision Lymph Nodes Nos
➡	4051	Rad Excis Axillary Lymph Nodes
	4052	Rad Excis Periaortic Lymph Node
	4053	Rad Excision Iliac Lymph Nodes
	4054	Radical Groin Dissection
➡	4059	Rad Excision Other Lymph Nodes
	4061	Cannulation Of Thoracic Duct
	4062	Fistulization Of Thoracic Duct
	4063	Closure Fistula Thoracic Duct

	Code #	Description
	4064	Ligation Of Thoracic Duct
	4069	Other Operations Thoracic Duct
➡	409	Oth Operations Lymph Structures
	4100	Bone Marrow Transplant Nos
	4101	Autologous Bone Marrow Transpl
	4102	Allogen Marrow Transpl W Purg
	4103	Allogen Marrow Transpl No Purg
	4104	Autol Hemat Stem Cell Transp
	4105	Allogenic Hematopoietic Stem Cell Transplant
	4106	Cord Blood Stem Cell Transplant
	411	Puncture Of Spleen
	412	Splenotomy
➡	4131	Biopsy Of Bone Marrow
➡	4132	Closed Biopsy Of Spleen
	4133	Open Biopsy Of Spleen
	4138	Other Dx Procedures Bone Marrow
	4139	Other Dx Procedures On Spleen
	4141	Marsupialization Splenic Cyst
	4142	Excision Lesion/Tissue Spleen
	4143	Partial Splenectomy
	415	Total Splenectomy
➡	4191	Aspir Bone Marrow Donor-Transpl
	4192	Injection Into Bone Marrow
	4193	Excision Of Accessory Spleen
	4194	Transplantation Of Spleen
	4195	Repair/Plastic Operation Spleen
	4198	Other Operations On Bone Marrow
	4199	Other Operations On Spleen
	4201	Incision Of Esophageal Web
	4209	Other Incision Of Esophagus

	Code #	Description
	4210	Esophagostomy Nos
	4211	Cervical Esophagostomy
	4212	Exteriorizatn Esophageal Pouch
	4219	Other Ext Fistulizatn Esophagus
➡	4221	Operative Esophagoscopy/Incis
➡	4222	Esophagoscopy Thru Artif Stoma
➡	4223	Other Esophagoscopy
➡	4224	Closed Biopsy Of Esophagus
➡	4225	Open Biopsy Of Esophagus
➡	4229	Other Dx Procedures Esophagus
	4231	Local Excisn Esoph Diverticulum
➡	4232	Local Excisn Oth Les/Tiss Esoph
➡	4233	Endo Exc/Destr Les/Tiss Esoph
➡	4239	Oth Destruct Lesion/Tiss Esoph
	4240	Esophagectomy Nos
	4241	Partial Esophagectomy
	4242	Total Esophagectomy
	4251	Intrathor Esophagoesophagostomy
	4252	Intrathor Esophagogastrostomy
	4253	Esoph Anast W Interpos Sm Bowel
	4254	Oth Intrathor Esophagoenterost
	4255	Esoph Anast With Interpos Colon
	4256	Oth Intrathor Esophagocolostomy
	4258	Esophageal Anast W Oth Interpos
	4259	Oth Intrathor Anast Esophagus
	4261	Antestern Esophagoesophagostomy
	4262	Antesternal Esophagogastrostomy
	4263	Antestern Esoph Anast-Sm Bowel
	4264	Oth Antestern Esophagoenterost
	4265	Antestern Esoph Anastomos-Colon

	Code #	Description
	4266	Oth Antestern Esophagocolostomy
	4268	Oth Antestrn Esoph Anast/Interp
	4269	Oth Antesternal Anast Esophagus
	427	Esophagomyotomy
➡	4281	Insert Permanent Tube Esophagus
	4282	Suture Of Laceration Esophagus
	4283	Closure Of Esophagostomy
	4284	Repair Esophageal Fistula NEC
	4285	Repair Of Esophageal Stricture
➡	4286	Product Subcu Tunnel No Anast
	4287	Other Graft Of Esophagus
	4289	Other Repair Of Esophagus
➡	4291	Ligation Of Esophageal Varices
➡	4292	Dilation Of Esophagus
➡	4299	Other Operations On Esophagus
	430	Gastrotomy
➡	4311	Percutaneous Gastrostomy
➡	4319	Other Gastrostomy
	433	Pyloromyotomy
➡	4341	Endo Excs/Destr Les/Tis Stomach
➡	4342	Loc Excis Oth Les/Tiss Stomach
	4349	Other Destruct Les/Tiss Stomach
	435	Partial Gastrectomy/Anast Esoph
	436	Part Gastrectomy/Anast Duodenum
	437	Part Gastrectomy/Anast Jejunum
	4381	Part Gastrect/Jejunal Transpos
	4389	Other Partial Gastrectomy
	4391	Tot Gastrectomy/Intest Inerpos
	4399	Other Total Gastrectomy
	4400	Vagotomy Nos

	Code #	Description
	4401	Truncal Vagotomy
	4402	Highly Selective Vagotomy
	4403	Other Selective Vagotomy
	4411	Transabdominal Gastroscopy
➡	4412	Gastroscopy Thru Artific Stoma
➡	4413	Other Gastroscopy
➡	4414	Closed Biopsy Of Stomach
➡	4415	Open Biopsy Of Stomach
	4419	Other Dx Procedures On Stomach
➡	4421	Dilation Of Pylorus By Incision
➡	4422	Endoscopic Dilation Of Pylorus
➡	4429	Other Pyloroplasty
	4431	High Gastric Bypass
	4439	Other Gastroenterostomy
	4440	Suture Of Peptic Ulcer Nos
	4441	Suture Of Gastric Ulcer Site
	4442	Suture Of Duodenal Ulcer Site
➡	4443	Endo Control Gastric/Duod Bleed
	4444	Transcath Embol Gast/Duod Bleed
	4449	Oth Contr Hem Stomach/Duodenum
	445	Revision Of Gastric Anastomosis
	4461	Suture Of Laceration Of Stomach
	4462	Closure Of Gastrostomy
➡	4463	Closure Other Gastric Fistula
	4464	Gastropexy
	4465	Esophagogastroplasty
	4466	Oth Op Esoph/Gast Sphinct Comp
➡	4469	Other Repair Of Stomach
	4491	Ligation Of Gastric Varices
	4492	Intraop Manipulation Of Stomach

	Code #	Description
	4493	Insert Gastric Bubble (Balloon)
	4494	Removal Gastric Bubble(Balloon)
➡	4499	Other Operations On Stomach
	4500	Incision Of Intestine Nos
	4501	Incision Of Duodenum
	4502	Other Incision Small Intestine
	4503	Incision Of Large Intestine
➡	4511	Transabd Endoscopy Sm Intestine
➡	4512	Endoscopy Sm Intest Thru Stoma
➡	4513	Other Endoscopy Small Intestine
➡	4514	Closed Biopsy Small Intestine
➡	4515	Open Biopsy Of Small Intestine
➡	4516	Esophagogastroduodenoscopy W Bx
➡	4519	Other Dx Proc Small Intestine
➡	4521	Transabd Endoscopy Large Intest
➡	4522	Endosc Large Intest Artif Stoma
➡	4523	Colonoscopy
➡	4524	Flexible Sigmoidoscopy
➡	4525	Closed Biopsy Large Intestine
➡	4526	Open Biopsy Of Large Intestine
➡	4527	Open Intest Biopsy Site Unspec
	4528	Other Dx Proc Large Intestine
	4529	Oth Dx Proc Intestine Site Nos
➡	4530	Endo Excis/Destr Les Duodenum
➡	4531	Oth Loc Excisn Lesion Duodenum
➡	4532	Oth Destruct Lesion Of Duodenum
➡	4533	Loc Excs Les Sm Intest Exc Duod
➡	4534	Oth Dest Les Sm Intest Exc Duod
➡	4541	Excisn Les/Tiss Large Intestine
➡	4542	Endosc Polypectomy Large Intest

	Code #	Description
➡	4543	Endosc Destr Oth Les Lrg Intest
➡	4549	Oth Destruct Lesion Lrg Intest
	4550	Isolation Intest Segment Nos
	4551	Isolation Segment Sm Intestine
	4552	Isolation Segment Lrg Intestine
	4561	Mult Segmental Resect Sm Intest
	4562	Oth Part Resection Sm Intestine
	4563	Total Removal Small Intestine
	4571	Mult Segment Resect Lrg Intest
	4572	Cecectomy
	4573	Right Hemicolectomy
	4574	Resection Of Transverse Colon
	4575	Left Hemicolectomy
	4576	Sigmoidectomy
	4579	Oth Part Excision Lrg Intestine
	458	Total Intra-Abdominal Colectomy
	4590	Intestinal Anastomosis Nos
	4591	Small-To-Small Intest Anastomos
	4592	Anast Sm Intestine-Rectal Stump
	4593	Oth Small-To-Large Intest Anast
	4594	Large-To-Large Intestinal Anast
	4595	Intestinal Anastomosis To Anus
	4601	Exteriorization Small Intestine
	4602	Resect Exteriorized Sm Intest
	4603	Exteriorization Large Intestine
	4604	Resect Exteriorized Lrg Intest
	4610	Colostomy Nos
	4611	Temporary Colostomy
	4613	Permanent Colostomy
	4614	Delayed Opening Of Colostomy

	Code #	Description
	4620	Ileostomy Nos
	4621	Temporary Ileostomy
	4622	Continent Ileostomy
	4623	Other Permanent Ileostomy
	4624	Delayed Opening Of Ileostomy
	4631	Delayed Opening Oth Enterostomy
	4632	Percutaneous Jejunostomy
	4639	Other Enterostomy
➡	4640	Revision Intestinal Stoma Nos
	4641	Revision Stoma Small Intestine
	4642	Repair Of Pericolostomy Hernia
➡	4643	Oth Revis Stoma Large Intestine
	4650	Closure Intestinal Stoma Nos
	4651	Closure Stoma Small Intestine
	4652	Closure Stoma Large Intestine
	4660	Fixation Of Intestine Nos
	4661	Fixation Sm Intestine-Abd Wall
	4662	Other Fixation Small Intestine
	4663	Fixation Lrg Intestine-Abd Wall
	4664	Other Fixation Large Intestine
	4671	Suture Of Laceration Duodenum
	4672	Closure Of Fistula Of Duodenum
	4673	Suture Lacn Sm Intest Exc Duod
	4674	Clos Fistula Sm Intest Exc Duod
	4675	Suture Laceratn Large Intestine
	4676	Closure Fistula Large Intestine
	4679	Other Repair Of Intestine
	4680	Intraabd Manip Intestine Nos
	4681	Intraabd Manip Small Intestine
➡	4682	Intraabd Manip Large Intestine

	Code #	Description
➡	4685	Dilation Of Intestine
	4691	Myotomy Of Sigmoid Colon
	4692	Myotomy Of Other Parts Of Colon
	4693	Revision Anast Small Intestine
	4694	Revision Anast Large Intestine
	4695	Local Perfusion Small Intestine
	4696	Local Perfusion Large Intestine
➡	4699	Other Operations On Intestines
➡	4701	Laparoscopic Appendectomy
➡	4709	Other Appendectomy
	4711	Laparoscopic Incidental Appendectomy
➡	4719	Other Incidental Appendectomy
	472	Drainage Of Appendiceal Abscess
	4791	Appendicostomy
	4792	Closure Of Appendiceal Fistula
	4799	Other Operations On Appendix
➡	480	Proctotomy
	481	Proctostomy
	4821	Transabd Proctosigmoidoscopy
➡	4822	Proctosigmoidoscopy Thru Stoma
➡	4823	Rigid Proctosigmoidoscopy
➡	4824	Closed Biopsy Of Rectum
➡	4825	Open Biopsy Of Rectum
➡	4826	Biopsy Of Perirectal Tissue
➡	4829	Oth Dx Proc Rect/Perirect Tiss
➡	4831	Rad Electrocoag Rectal Les/Tiss
➡	4832	Oth Electrocoag Rectal Les/Tiss
➡	4833	Destruct Rectal Les/Tiss Laser
➡	4834	Destruct Rect Les/Tiss Cryosurg
➡	4835	Local Excision Rectal Les/Tiss

	Code #	Description
➡	4836	(Endo) Polypectomy Of Rectum
	4841	Soave Submucosal Resect Rectum
	4849	Oth Pull-Through Resect Rectum
	485	Abdominoperineal Resect Rectum
➡	4861	Transsacral Rectosigmoidectomy
	4862	Ant Resect Rectum W Colostomy
	4863	Other Anterior Resection Rectum
	4864	Posterior Resection Of Rectum
	4865	Duhamel Resection Of Rectum
➡	4869	Other Resection Of Rectum
➡	4871	Suture Of Laceration Of Rectum
	4872	Closure Of Proctostomy
➡	4873	Closure Of Other Rectal Fistula
	4874	Rectorectostomy
	4875	Abdominal Proctopexy
➡	4876	Other Proctopexy
➡	4879	Other Repair Of Rectum
➡	4881	Incision Of Perirectal Tissue
➡	4882	Excision Of Perirectal Tissue
	4891	Incision Of Rectal Stricture
	4892	Anorectal Myectomy
➡	4893	Repair Of Perirectal Fistula
➡	4899	Oth Operations Rectum/Perirect
➡	4901	Incision Of Perianal Abscess
➡	4902	Other Incision Perianal Tissue
➡	4903	Excision Of Perianal Skin Tags
➡	4904	Other Excision Perianal Tissue
➡	4911	Anal Fistulotomy
➡	4912	Anal Fistulectomy
➡	4921	Anoscopy

	Code #	Description
➡	4922	Biopsy Of Perianal Tissue
➡	4923	Biopsy Of Anus
➡	4929	Oth Dx Proc Anus/Perianal Tiss
➡	4931	Endosc Excs/Destr Les/Tiss Anus
➡	4939	Oth Loc Excs/Destr Les/Tis Anus
➡	4941	Reduction Of Hemorrhoids
➡	4942	Injection Of Hemorrhoids
➡	4943	Cauterization Of Hemorrhoids
➡	4944	Destr Hemorrhoid By Cryotherapy
➡	4945	Ligation Of Hemorrhoids
➡	4946	Excision Of Hemorrhoids
➡	4947	Evacuat Thrombosed Hemorrhoids
➡	4949	Other Procedures On Hemorrhoids
➡	4951	Left Lat Anal Sphincterotomy
➡	4952	Posterior Anal Sphincterotomy
➡	4959	Other Anal Sphincterotomy
➡	496	Excision Of Anus
➡	4971	Suture Of Laceration Of Anus
➡	4972	Anal Cerclage
➡	4973	Closure Of Anal Fistula
	4974	Gracilis Transplant/Anal Incont
➡	4979	Other Repair Of Anal Sphincter
	4991	Incision Of Anal Septum
➡	4992	Insert Subcu Electric Anal Stim
➡	4993	Other Incision Of Anus
	4994	Reduction Of Anal Prolapse
	4995	Control (Postop)Hemorrhage Anus
➡	4999	Other Operations On Anus
	500	Hepatotomy
➡	5011	Closed Biopsy Of Liver

	Code #	Description
➡	5012	Open Biopsy Of Liver
	5019	Other Dx Procedures On Liver
	5021	Marsupialization Lesion Liver
	5022	Partial Hepatectomy
	5029	Other Destruction Lesion Liver
	503	Lobectomy Of Liver
	504	Total Hepatectomy
	5051	Auxiliary Liver Transplant
	5059	Other Transplant Of Liver
	5061	Closure Of Laceration Of Liver
	5069	Other Repair Of Liver
➡	5091	Percutaneous Aspiration Liver
	5092	Extracorporeal Hepatic Assist
	5093	Localized Perfusion Of Liver
	5094	Oth Injection Ther Subst Liver
	5099	Other Operations On Liver
	5101	Percutan Aspiration Gallbladder
	5102	Trocar Cholecystostomy
	5103	Other Cholecystostomy
	5104	Other Cholecystotomy
➡	5110	Ercp
➡	5111	Endo Retro Cholangiography(Erc)
	5112	Cl Biopsy Gallbladder/Bile Duct
➡	5113	Op Biopsy Gallbladder/Bile Duct
➡	5114	Oth Cl Biopsy Bil/Sphinct Oddi
➡	5115	Press Measure Sphincter Of Oddi
➡	5119	Oth Dx Procedures Biliary Tract
	5121	Other Partial Cholecystectomy
➡	5122	Cholecystectomy
➡	5123	Laparoscopic Cholecystectomy

	Code #	Description
	5124	Laparoscopic Partial Cholecystectomy
	5131	Anast Gallbladder-Hepatic Ducts
	5132	Anastomos Gallbladder-Intestine
	5133	Anastomos Gallbladder-Pancreas
	5134	Anastomosis Gallbladder-Stomach
	5135	Other Gallbladder Anastomosis
	5136	Choledochoenterostomy
	5137	Anastomos Hepatic Duct-Gi Tract
	5139	Other Bile Duct Anastomosis
	5141	Common Duct Explor-Removal Calc
	5142	Common Duct Explor-Relief Obst
	5143	Insrt Choledochohep Tube-Decomp
➡	5149	Incis Oth Bile Duct-Relief Obst
➡	5151	Exploration Of Common Duct
	5159	Incision Of Other Bile Duct
	5161	Excision Of Cystic Duct Remnant
	5162	Excision Ampulla Of Vater
	5163	Other Excision Of Common Duct
	5164	Endo Exc/Dest Les Bil Duct/Oddi
	5169	Excision Of Other Bile Duct
	5171	Simple Suture Common Bile Duct
	5172	Choledochoplasty
	5179	Repair Of Other Bile Ducts
	5181	Dilation Of Sphincter Of Oddi
➡	5182	Pancreatic Sphincterotomy
➡	5183	Pancreatic Sphincteroplasty
➡	5184	Endo Dilat Ampulla/Biliary Duct
➡	5185	Endo Sphincterotomy/Papillotomy
	5186	Endo Insert Nasobiliary Drain
➡	5187	Endo Insert Stent In Bile Duct

	Code #	Description
➡	5188	Endo Remov Stone Biliary Tract
	5189	Other Operations Sphincter Oddi
	5191	Repair Laceration Gallbladder
	5192	Closure Of Cholecystostomy
	5193	Closure Other Biliary Fistula
	5194	Revis Anastomosis Biliary Tract
	5195	Removal Prosth Device Bile Duct
➡	5196	Percutan Extrc Common Dct Stone
➡	5198	Oth Percutan Proc Biliary Tract
➡	5199	Other Operations Biliary Tract
➡	5201	Drain Pancreatic Cyst By Cath
➡	5209	Other Pancreatotomy
➡	5211	Closed Biopsy Of Pancreas
➡	5212	Open Biopsy Of Pancreas
➡	5213	Endo Retrograde Pancreatography
➡	5214	Closed Biopsy Pancreatic Duct
➡	5219	Other Dx Procedures On Pancreas
➡	5221	Endo Excis/Destr Les Pancr Duct
	5222	Oth Exc/Dest Les/Tis Panc Duct
	523	Marsupializatn Pancreatic Cyst
	524	Internal Drain Pancreatic Cyst
	5251	Proximal Pancreatectomy
	5252	Distal Pancreatectomy
	5253	Radical Subtotal Pancreatectomy
	5259	Other Partial Pancreatectomy
	526	Total Pancreatectomy
	527	Radical Pancreaticoduodenectomy
	5280	Pancreatic Transplant Nos
	5281	Reimplantation Pancreatic Tiss
	5282	Homotransplant Of Pancreas

	Code #	Description
	5283	Heterotransplant Of Pancreas
	5284	Autotransplant Of Cells Of Islets Of
	5285	Allotransplant Of Cells Of Islets Of
	5286	Trans Cells Of Islets Of Langerhans Nos
➡	5292	Cannulation Of Pancreatic Duct
➡	5293	Endo Insert Stent Pancreat Duct
➡	5294	Endo Remov Stone Pancreat Duct
	5295	Other Repair Of Pancreas
	5296	Anastomosis Of Pancreas
	5297	Endo Insert Nasopancreat Drain
➡	5298	Endosc Dilation Pancreatic Duct
➡	5299	Other Operations On Pancreas
➡	5300	Unilat Repr Inguinal Hernia Nos
➡	5301	Repair Direct Inguinal Hernia
➡	5302	Repair Indirect Inguinal Hernia
➡	5303	Repr Dir Ing Hernia Grf/Prosth
➡	5304	Repr Indir Ing Hernia Grf/Pros
➡	5305	Repr Ing Hernia Grf/Prosth Nos
➡	5310	Bilat Repr Inguinal Hernia Nos
➡	5311	Bil Repr Direct Inguinal Hernia
➡	5312	Bil Repr Indir Inguinal Hernia
➡	5313	Bil Repair Ing Hernia Dir/Indir
➡	5314	Bil Repr Dir Ing Hernia W Grf
➡	5315	Bil Repr Indir Ing Hernia W Grf
➡	5316	Bil Repr Ing Hernia Dir/Ind Grf
➡	5317	Bilat Repr Ing Hernia Graft Nos
➡	5321	Unilat Repr Fem Hernia Grf/Pros
➡	5329	Oth Unil Femoral Herniorrhaphy
➡	5331	Bil Repr Fem Hernia Grf/Prosth
➡	5339	Oth Bilat Femoral Herniorrhaphy

	Code #	Description
➡	5341	Repair Umbilical Hernia Prosth
➡	5349	Other Umbilical Herniorrhaphy
➡	5351	Incisional Hernia Repair
➡	5359	Repr Oth Hernia Ant Abdom Wall
➡	5361	Incision Hernia Repair W Prosth
➡	5369	Repr Oth Hernia Abdom W Prosth
	537	Repr Diaphragmatic Hernia Abdom
	5380	Repr Diaphragm Hernia Thor Nos
	5381	Plication Of The Diaphragm
	5382	Repair Of Parasternal Hernia
➡	539	Other Hernia Repair
➡	540	Incision Of Abdominal Wall
➡	5411	Exploratory Laparotomy
➡	5412	Reopen Recent Laparotomy Site
➡	5419	Other Laparotomy
➡	5421	Laparoscopy
➡	5422	Biopsy Abdominal Wall/Umbilicus
➡	5423	Biopsy Of Peritoneum
➡	5424	Closed Biopsy Intraabdom Mass
	5425	Peritoneal Lavage
➡	5429	Other Dx Proc Abdominal Region
➡	543	Excis/Destr Les/Tiss Abdom Wall
➡	544	Excis/Destruct Peritoneal Tiss
➡	5451	Laparoscopic Lysis Of Peritoneal Adhesions
➡	5459	Other Lysis Of Peritoneal Adhesions
➡	5461	Reclos Postop Disrupt Abd Wall
	5462	Delayed Closure Gran Abdom Wnd
	5463	Other Suture Of Abdominal Wall
	5464	Suture Of Peritoneum
	5471	Repair Of Gastroschisis

	Code #	Description
➡	5472	Other Repair Of Abdominal Wall
	5473	Other Repair Of Peritoneum
	5474	Other Repair Of Omentum
	5475	Other Repair Of Mesentery
➡	5491	Percutaneous Abdominal Drainage
➡	5492	Removal Fb Peritoneal Cavity
➡	5493	Creat Cutaneoperitoneal Fistula
	5494	Creat Peritoneovascular Shunt
➡	5495	Incision Of Peritoneum
	5496	Injection Air Peritoneal Cavity
	5497	Inject Ther Subst Periton Cav
➡	5498	Peritoneal Dialysis
➡	5499	Oth Operations Abdominal Region
➡	5501	Nephrotomy
➡	5502	Nephrostomy
➡	5503	Percutan Nephrost No Fragment
➡	5504	Percutan Nephrostomy W Fragment
	5511	Pyelotomy
	5512	Pyelostomy
➡	5521	Nephroscopy
	5522	Pyeloscopy
➡	5523	Closed Biopsy Of Kidney
	5524	Open Biopsy Of Kidney
	5529	Other Dx Procedures On Kidney
	5531	Marsupialization Kidney Lesion
➡	5539	Oth Excis/Destr Renal Les/Tiss
	554	Partial Nephrectomy
	5551	Nephroureterectomy
	5552	Nephrectomy Of Remaining Kidney
	5553	Remov Transplant/Reject Kidney

	Code #	Description
	5554	Bilateral Nephrectomy
	5561	Renal Autotransplantation
	5569	Other Kidney Transplant
	557	Nephropexy
	5581	Suture Of Laceration Of Kidney
	5582	Closure Nephrostomy/Pyelostomy
	5583	Closure Other Fistula Of Kidney
	5584	Reduction Torsion Renal Pedicle
	5585	Symphysiotomy Horseshoe Kidney
	5586	Anastomosis Of Kidney
	5587	Correct Ureteropelvic Junction
	5589	Other Repair Of Kidney
	5591	Decapsulation Of Kidney
➡	5592	Percutaneous Aspiration Kidney
	5593	Replacement Of Nephrostomy Tube
	5594	Replacement Of Pyelostomy Tube
	5595	Local Perfusion Of Kidney
	5596	Oth Injection Ther Subst Kidney
	5597	Implant/Replacement Mech Kidney
	5598	Removal Of Mechanical Kidney
	5599	Other Operations On Kidney
➡	560	Transureth Remov Obst Uret/Pelv
➡	561	Ureteral Meatotomy
➡	562	Ureterotomy
➡	5631	Ureteroscopy
	5632	Closed Percutan Biopsy Ureter
➡	5633	Closed Endoscopic Biopsy Ureter
➡	5634	Open Biopsy Of Ureter
➡	5635	Endoscopy Of Ileal Conduit
	5639	Other Dx Procedures On Ureter

	Code #	Description
	5640	Ureterectomy Nos
➡	5641	Partial Ureterectomy
	5642	Total Ureterectomy
	5651	Formatn Cutan Ureteroileostomy
	5652	Revision Cutan Ureteroileostomy
	5661	Formatn Oth Cutan Ureterostomy
➡	5662	Revision Oth Cutan Ureterostomy
	5671	Urinary Diversion To Intestine
	5672	Revis Ureterointest Anastomosis
	5673	Nephrocystanastomosis Nos
	5674	Ureteroneocystostomy
	5675	Transureteroureterostomy
	5679	Other Anastomosis/Bypass Ureter
	5681	Lysis Intraluminal Adhes Ureter
	5682	Suture Of Laceration Of Ureter
	5683	Closure Of Ureterostomy
	5684	Closure Other Fistula Of Ureter
	5685	Ureteropexy
	5686	Removal Of Ligature From Ureter
➡	5689	Other Repair Of Ureter
➡	5691	Dilation Of Ureteral Meatus
	5692	Implant Elect Ureteral Stimulat
	5693	Replace Elect Ureteral Stimulat
	5694	Remov Elect Ureteral Stimulator
	5695	Ligation Of Ureter
➡	5699	Other Operations On Ureter
➡	570	Transurethral Clearance Bladder
➡	5711	Percutaneous Aspiration Bladder
➡	5712	Lysis Intralum Adhes/Incis Blad
➡	5717	Percutaneous Cystostomy

	Code #	Description
➡	5718	Other Suprapubic Cystostomy
➡	5719	Other Cystotomy
➡	5721	Vesicostomy
➡	5722	Revision/Closure Of Vesicostomy
➡	5731	Cystoscopy Thru Artific Stoma
➡	5732	Other Cystoscopy
➡	5733	Closed Biopsy Of Bladder
➡	5734	Open Biopsy Of Bladder
➡	5739	Other Dx Procedures On Bladder
	5741	Transureth Lys Intrl Adhes Blad
➡	5749	Oth Transur Excs/Destr Les Blad
➡	5751	Excision Of Urachus
➡	5759	Open Excis/Destr Les/Tiss Blad
➡	576	Partial Cystectomy
	5771	Radical Cystectomy
	5779	Other Total Cystectomy
	5781	Suture Of Laceration Of Bladder
➡	5782	Closure Of Cystostomy
➡	5783	Repr Fistula Bladder/Intestine
➡	5784	Repair Other Fistula Of Bladder
➡	5785	Cystourethroplast/Repr Blad Nck
	5786	Repair Of Bladder Exstrophy
	5787	Reconstruction Urinary Bladder
	5788	Other Anastomosis Of Bladder
	5789	Other Repair Of Bladder
➡	5791	Sphincterotomy Of Bladder
➡	5792	Dilation Of Bladder Neck
➡	5793	Contr Postop Hemorrhage Bladder
	5794	Insert Indwelling Urinary Cath
	5795	Replace Indwelling Urinary Cath

	Code #	Description
➡	5796	Implantation Elect Bladder Stim
	5797	Replacement Elect Bladder Stim
	5798	Removal Electronic Bladder Stim
➡	5799	Other Operations On Bladder
➡	580	Urethrotomy
➡	581	Urethral Meatotomy
	5821	Perineal Urethroscopy
➡	5822	Other Urethroscopy
➡	5823	Biopsy Of Urethra
➡	5824	Biopsy Of Periurethral Tissue
	5829	Other Dx Proc Urethra/Periureth
➡	5831	Endo Excis/Destr Les/Tiss Ureth
➡	5839	Oth Excis/Destr Les/Tiss Ureth
	5841	Suture Of Laceration Of Urethra
	5842	Closure Of Urethrostomy
➡	5843	Closure Other Fistula Urethra
	5844	Reanastomosis Of Urethra
➡	5845	Repair Hypospadias/Epispadias
➡	5846	Other Reconstruction Of Urethra
➡	5847	Urethral Meatoplasty
➡	5849	Other Repair Of Urethra
➡	585	Release Of Urethral Stricture
➡	586	Dilation Of Urethra
➡	5891	Incision Of Periurethral Tissue
➡	5892	Excision Of Periurethral Tissue
➡	5893	Implant Artific Urinary Sphinct
➡	5899	Other Op Urethra/Periureth Tiss
	5900	Retroperitoneal Dissection Nos
➡	5902	Oth Lysis Periren/Periur Adhes
➡	5903	Laparoscopic Lysis Perirenal/Periureteral

	Code #	Description
➡	5909	Oth Incis Periren/Periuret Tiss
	5911	Lysis Of Perivesical Adhesions
	5912	Laparoscopic Lysis Of Perivesical Adhesions
	5919	Other Incision Perivesical Tiss
	5921	Biopsy Periren/Perivesical Tiss
	5929	Oth Dx Proc Periren/Perives Tis
	593	Plication Urethrovesical Junctn
	594	Suprapubic Sling Operation
➡	595	Retropubic Urethral Suspension
	596	Paraurethral Suspension
➡	5971	Levator Musc Op Urethroves Susp
➡	5972	Inject Implant/Ureth/Bladd Neck
➡	5979	Oth Repr Urinary Stress Incont
➡	598	Ureteral Catheterization
	5991	Excision Perirenal/Perives Tiss
	5992	Oth Op Periren/Perivesical Tiss
	5993	Replacement Ureterostomy Tube
	5994	Replacement Of Cystostomy Tube
➡	5995	Ultrason Fragment Urinary Stone
➡	5999	Other Operations Urinary System
➡	600	Incision Of Prostate
➡	6011	Closed Biopsy Of Prostate
➡	6012	Open Biopsy Of Prostate
	6013	Closed Biopsy Seminal Vesicles
	6014	Open Biopsy Of Seminal Vesicles
	6015	Biopsy Of Periprostatic Tissue
	6018	Oth Dx Proc Prostate/Periprost
	6019	Other Dx Proc Seminal Vesicles
➡	6021	Transureth Laser Prostatectomy
➡	6029	Oth Transureth Prostatectomy

	Code #	Description
	603	Suprapubic Prostatectomy
	604	Retropubic Prostatectomy
	605	Radical Prostatectomy
➡	6061	Local Excision Lesion Prostate
	6062	Perineal Prostatectomy
	6069	Other Prostatectomy
	6071	Percutan Aspir Seminal Vesicle
➡	6072	Incision Of Seminal Vesicle
➡	6073	Excision Of Seminal Vesicle
	6079	Oth Operations Seminal Vesicles
	6081	Incision Periprostatic Tissue
	6082	Excision Periprostatic Tissue
➡	6091	Percutaneous Aspiratn Prostate
	6092	Injection Into Prostate
	6093	Repair Of Prostate
➡	6094	Control(Postop)Hemorrhage Prost
➡	6095	Transureth Ball Dil Prost Ureth
➡	6099	Other Operations On Prostate
➡	610	Inc/Drain Scrotum/Tunica Vagin
➡	6111	Biopsy Scrotum/Tunica Vaginalis
	6119	Oth Dx Proc Scrot/Tunica Vagin
➡	612	Excis Hydrocele (Tunica Vagin)
➡	613	Excis/Destruct Les/Tiss Scrotum
➡	6141	Suture Lacn Scrot/Tunica Vagin
➡	6142	Repair Of Scrotal Fistula
➡	6149	Oth Repair Scrotum/Tunica Vagin
	6191	Percutan Aspir Tunica Vaginalis
	6192	Excision Les Tunica Vaginalis
➡	6199	Oth Op Scrotum/Tunica Vaginalis
➡	620	Incision Of Testes

	Code #	Description
➡	6211	Closed Biopsy Of Testes
➡	6212	Open Biopsy Of Testes
	6219	Other Dx Procedures On Testes
➡	622	Excis/Destruct Testicular Les
➡	623	Unilateral Orchiectomy
➡	6241	Removal Both Testes At Same Op
➡	6242	Removal Of Remaining Testis
➡	625	Orchiopexy
	6261	Suture Of Laceration Of Testes
➡	6269	Other Repair Of Testes
➡	627	Insertion Testicular Prosthesis
	6291	Aspiration Of Testis
	6292	Injection Ther Substance Testis
➡	6299	Other Operations On Testes
➡	6301	Biopsy Sperm Cord/Epid/Vas Def
	6309	Oth Dx Proc Sperm/Epid/Vas Def
➡	631	Excis Varico/Hydrocel Sperm Crd
➡	632	Excision Of Cyst Of Epididymis
➡	633	Excis Oth Les/Ts Sperm Crd/Epid
➡	634	Epididymectomy
	6351	Sut Lacn Sperm Cord/Epididymis
➡	6352	Reductn Torsn Testis/Sperm Crd
	6353	Transplantation Spermatic Cord
➡	6359	Oth Repair Spermatic Cord/Epid
➡	636	Vasotomy
➡	6370	Male Sterilization Procedure
➡	6371	Ligation Of Vas Deferens
➡	6372	Ligation Of Spermatic Cord
➡	6373	Vasectomy
➡	6381	Suture Lacn Vas Def/Epididymis

	Code #	Description
➡	6382	Reconstruct Divided Vas Deferen
➡	6383	Epididymovasostomy
	6384	Removal Ligature Vas Deferens
	6385	Removal Valve From Vas Deferens
➡	6389	Other Repair Vas Deferens/Epid
	6391	Aspiration Of Spermatocele
➡	6392	Epididymotomy
➡	6393	Incision Of Spermatic Cord
	6394	Lysis Adhesions Spermatic Cord
	6395	Insertion Valve In Vas Deferens
➡	6399	Oth Op Sperm Cord/Epid/Vas Def
➡	640	Circumcision
➡	6411	Biopsy Of Penis
➡	6419	Other Dx Procedures On Penis
➡	642	Loc Excis/Destruct Lesion Penis
	643	Amputation Of Penis
➡	6441	Suture Of Laceration Of Penis
➡	6442	Release Of Chordee
	6443	Construction Of Penis
	6444	Reconstruction Of Penis
	6445	Replantation Of Penis
➡	6449	Other Repair Of Penis
	645	Operat Sex Transformation NEC
➡	6491	Dorsal Or Lateral Slit Prepuce
➡	6492	Incision Of Penis
➡	6493	Division Of Penile Adhesions
	6494	Fitting Of Ext Prosthesis Penis
➡	6495	Insrt/Repl Noninflat Penis Pros
➡	6496	Removal Internal Prosth Penis
➡	6497	Insrt/Repl Inflat Penile Prosth

	Code #	Description
➡	6498	Other Operations On Penis
➡	6499	Oth Operat Male Genital Organs
➡	6501	Laparoscopic Oophorectomy
➡	6509	Other Oophorectomy
➡	6511	Aspiration Biopsy Of Ovary
➡	6512	Other Biopsy Of Ovary
➡	6513	Laparoscopic Biopsy Of Ovary
➡	6514	Oth Laparoscopic Diag Proc On Ovaries
➡	6519	Other Dx Procedures On Ovaries
➡	6521	Marsupialization Ovarian Cyst
➡	6522	Wedge Resection Of Ovary
➡	6523	Laparoscopic Marsupialization Of Ovarian Cyst
➡	6524	Laparoscopic Wedge Resection Of Ovary
➡	6525	Oth Laparoscopic Local Exc Or Des Of Ovary
➡	6529	Oth Local Excis/Destruct Ovary
➡	6531	Laparoscopic Unilateral Oophorectomy
➡	6539	Other Unilateral Oophorectomy
➡	6541	Laparoscopic Unilateral Salpingo-
➡	6549	Other Unilateral Salpingo-Oophorectomy
➡	6551	Removal Both Ovaries At Same Op
	6552	Removal Of Remaining Ovary
➡	6553	Laparoscopic Remov Both Ovaries Same Op
➡	6554	Laparoscopic Remov Of Remaining Ovary
➡	6561	Remov Both Ovary/Tubes Same Op
➡	6562	Remov Remaining Ovary And Tube
➡	6563	Laparoscopic Remov Ovar And Tubes Same Op
➡	6564	Laparoscopic Remov Of Remain Ovary And Tube
	6571	Simple Suture Of Ovary
	6572	Reimplantation Of Ovary
	6573	Salpingo-Oophoroplasty

	Code #	Description
	6574	Laparoscopic Simple Suture Of Ovary
	6575	Laparoscopic Reimplantation Of Ovary
	6576	Laparoscopic Salpingo-Oophoroplasty
➡	6579	Other Repair Of Ovary
➡	6581	Laparoscopic Lysis Of Adh Of Ovary And Fall
➡	6589	Other Lysis Of Adh Of Ovary And Fall Tube
➡	6591	Aspiration Of Ovary
	6592	Transplantation Of Ovary
	6593	Manual Rupture Of Ovarian Cyst
	6594	Ovarian Denervation
➡	6595	Release Of Torsion Of Ovary
➡	6599	Other Operations On Ovary NEC
➡	6601	Salpingotomy
➡	6602	Salpingostomy
➡	6611	Biopsy Of Fallopian Tube
➡	6619	Other Dx Proc Fallopian Tubes
➡	6621	Bilat Endosc Ligat/Crush Fallop
➡	6622	Bilat Endosc Ligat/Divis Fallop
➡	6629	Oth Bilat Endo Destr/Ocl Fallop
➡	6631	Oth Bilat Ligat/Crush Fallopian
➡	6632	Oth Bilat Ligat/Divis Fallopian
➡	6639	Oth Bilat Destr/Ocl Fallopian
➡	664	Total Unilateral Salpingectomy
➡	6651	Remov Both Fallop Tubes Same Op
	6652	Remov Remaining Fallopian Tube
➡	6661	Excis/Destr Les Fallopian Tube
➡	6662	Salpingectomy/Remov Tubal Preg
➡	6663	Bilat Partial Salpingectomy Nos
➡	6669	Other Partial Salpingectomy
➡	6671	Simple Suture Of Fallopian Tube

	Code #	Description
	6672	Salpingo-Oophorostomy
➡	6673	Salpingo-Salpingostomy
	6674	Salpingo-Uterostomy
➡	6679	Other Repair Of Fallopian Tube
➡	668	Insufflation Of Fallopian Tube
➡	6691	Aspiration Of Fallopian Tube
➡	6692	Unilat Destr/Occlus Fallop Tube
	6693	Implant/Replac Prosthesis Tube
➡	6694	Removal Prosthesis Fallop Tube
	6695	Insufflat Ther Agent Fallopian
	6696	Dilation Of Fallopian Tube
	6697	Burying Fimbriae Uterine Wall
➡	6699	Other Operation Fallopian Tubes
➡	670	Dilation Of Cervical Canal
➡	6711	Endocervical Biopsy
➡	6712	Other Cervical Biopsy
➡	6719	Other Dx Procedures On Cervix
➡	672	Conization Of Cervix
➡	6731	Marsupialization Cervical Cyst
➡	6732	Destruct Les Cervix Cauterizatn
➡	6733	Destruct Les Cervix Cryosurgery
➡	6739	Oth Excis/Destr Les/Tiss Cervix
➡	674	Amputation Of Cervix
➡	675	Repair Of Internal Cervical Os
➡	6761	Suture Of Laceration Of Cervix
	6762	Repair Of Fistula Of Cervix
➡	6769	Other Repair Of Cervix
	680	Hysterotomy
	6811	Digital Examination Of Uterus
➡	6812	Hysteroscopy

	Code #	Description
➡	6813	Open Uterine Biopsy
➡	6814	Open Biopsy Uterine Ligaments
➡	6815	Closed Biopsy Uterine Ligaments
➡	6816	Closed Biopsy Of Uterus
➡	6819	Other Dx Proc Uterus/Supports
➡	6821	Division Endometrial Synechiae
➡	6822	Incis/Excis Congen Sept Uterus
➡	6823	Endometrial Ablation
➡	6829	Oth Excis/Destr Lesion Uterus
➡	683	Subtotal Abdominal Hysterectomy
➡	684	Total Abdominal Hysterectomy
➡	6851	Laparoscopically Asst Vaginal Hysterectomy
➡	6859	Other Vaginal Hysterectomy
	686	Radical Abdominal Hysterectomy
	687	Radical Vaginal Hysterectomy
	688	Pelvic Exenteration
➡	689	Other & Unspec Hysterectomy
➡	6901	D & C For Termination Pregnancy
➡	6902	D & C Following Delivery/Abortn
➡	6909	Other Dilation And Curettage
➡	6919	Oth Excis/Destr Uterus/Supports
	6921	Interposition Operation
➡	6922	Other Uterine Suspension
	6923	Vag Repair Chr Inversion Uterus
➡	6929	Other Repair Uterus/Supp Struct
➡	693	Paracervical Uterine Denervatn
➡	6941	Suture Of Laceration Of Uterus
	6942	Closure Of Fistula Of Uterus
➡	6949	Other Repair Of Uterus
➡	6951	Aspirat Curett Termination Preg

	Code #	Description
➡	6952	Aspir Curett Foll Deliv/Abortn
➡	6959	Oth Aspiration Curettage Uterus
	696	Menstrual Extraction/Regulation
➡	697	Insert Intraut Contracept Dev
	6991	Insert Ther Device Into Uterus
	6992	Artificial Insemination
➡	6993	Insertion Of Laminaria
	6994	Manual Replace Inverted Uterus
➡	6995	Incision Of Cervix
➡	6996	Remov Cerclage Material Cervix
	6997	Removal Oth Penetrat Fb Cervix
➡	6998	Oth Op Support Structure Uterus
➡	6999	Other Operations Cervix/Uterus
➡	700	Culdocentesis
➡	7011	Hymenotomy
➡	7012	Culdotomy
➡	7013	Lysis Intralum Adhesions Vagina
➡	7014	Other Vaginotomy
➡	7021	Vaginoscopy
➡	7022	Culdoscopy
➡	7023	Biopsy Of Cul-De-Sac
➡	7024	Vaginal Biopsy
➡	7029	Other Dx Proc Vagina/Cul-De-Sac
➡	7031	Hymenectomy
➡	7032	Excis/Destruct Les Cul-De-Sac
➡	7033	Excision/Destruct Lesion Vagina
➡	704	Obliteration/Total Excis Vagina
➡	7050	Repair Cystocele And Rectocele
➡	7051	Repair Of Cystocele
➡	7052	Repair Of Rectocele

	Code #	Description
	7061	Vaginal Construction
	7062	Vaginal Reconstruction
➡	7071	Suture Of Laceration Of Vagina
➡	7072	Repair Of Colovaginal Fistula
➡	7073	Repair Of Rectovaginal Fistula
➡	7074	Repr Oth Vaginoenteric Fistula
➡	7075	Repair Of Other Fistula Vagina
➡	7076	Hymenorrhaphy
	7077	Vaginal Suspension And Fixation
➡	7079	Other Repair Of Vagina
➡	708	Obliteration Of Vaginal Vault
➡	7091	Other Operations On Vagina
	7092	Other Operations On Cul-De-Sac
➡	7101	Lysis Of Vulvar Adhesions
➡	7109	Other Incision Vulva/Perineum
➡	7111	Biopsy Of Vulva
➡	7119	Other Dx Procedures On Vulva
➡	7121	Percutan Aspirat Bartholin's Gl
➡	7122	Incision Of Bartholin's Gland
➡	7123	Marsupialization Bartholin's Gl
➡	7124	Excis/Oth Destr Bartholin's Gl
➡	7129	Oth Operation Bartholin's Gland
➡	713	Oth Loc Excis/Destr Vulva/Perin
➡	714	Operations On Clitoris
	715	Radical Vulvectomy
➡	7161	Unilateral Vulvectomy
➡	7162	Bilateral Vulvectomy
➡	7171	Suture Laceratn Vulva/Perineum
➡	7172	Repair Fistula Vulva/Perineum
➡	7179	Other Repair Of Vulva/Perineum

	Code #	Description
➨	718	Other Operations On Vulva
	719	Other Op Female Genital Organs
	720	Low Forceps Operation
	721	Low Forceps Operation With Epis
	7221	Mid Forceps Operation With Epis
	7229	Other Mid Forceps Operation
	7231	High Forceps Operation W Epis
	7239	Other High Forceps Operation
	724	Forceps Rotation Of Fetal Head
	7251	Part Breech Extract/Forceps Hd
	7252	Other Partial Breech Extraction
	7253	Tot Breech Extract/Forceps Head
	7254	Other Total Breech Extraction
	726	Forceps To Aftercoming Head
	7271	Vacuum Extraction W Episiotomy
	7279	Other Vacuum Extraction
	728	Oth Spec Instrumental Delivery
	729	Unspec Instrumental Delivery
	7301	Induct Labor Artific Rupt Memb
	7309	Other Artific Rupture Membranes
	731	Other Surgical Induction Labor
	7321	Int/Combined Version No Extract
	7322	Int/Combined Version W Extract
	733	Failed Forceps
	734	Medical Induction Of Labor
	7351	Manual Rotation Of Fetal Head
	7359	Oth Manually Assisted Delivery
	736	Episiotomy
	738	Operations Fetus Facil Delivery
	7391	External Version

	Code #	Description
	7392	Replac Prolapsed Umbilical Cord
	7393	Incision Cervix Assist Delivery
	7394	Pubiotomy To Assist Delivery
	7399	Oth Operations Assist Delivery
	740	Classical Cesarean Section
	741	Low Cervical Cesarean Section
	742	Extraperiton Cesarean Section
➡	743	Removal Extratubal Ectopic Preg
	744	Cesarean Section Oth Spec Type
	7491	Hysterotomy To Terminate Preg
	7499	Oth Cesarean Section Type Nos
➡	750	Intraamn Injection For Abortion
➡	751	Diagnostic Amniocentesis
	752	Intrauterine Transfusion
	7531	Amnioscopy
	7532	Fetal Ekg (Scalp)
➡	7533	Fetal Blood Sampling And Biopsy
	7534	Fetal Monitoring Nos
	7535	Oth Dx Procedures Fetus/Amnion
	7536	Correction Of Fetal Defect
	7537	Amnioinfusion
	754	Manual Remov Retained Placenta
	7550	Repair Obs Laceratn Uterus Nos
	7551	Repair Obs Laceration Cervix
	7552	Repair Obs Lacn Corpus Uteri
	7561	Repair Obs Lacn Bladder/Urethra
	7562	Repr Obs Lacn Rect/Sphinct Ani
➡	7569	Repair Other Obs Laceration
	757	Man Explor Uterine Cav Postpart
	758	Obs Tamponade Uterus Or Vagina

	Code #	Description
	7591	Evacuat Obs Inc Hemat Perineum
	7592	Evacuat Oth Hematoma Vulva/Vag
	7593	Surg Correction Inverted Uterus
	7594	Manual Replace Inverted Uterus
	7599	Other Obstetric Operations
➡	7601	Sequestrectomy Of Facial Bone
➡	7609	Other Incision Of Facial Bone
➡	7611	Biopsy Of Facial Bone
➡	7619	Oth Dx Proc Facial Bones/Joints
➡	762	Loc Excis/Destr Les Facial Bone
	7631	Partial Mandibulectomy
➡	7639	Part Ostectomy Oth Facial Bone
	7641	Tot Mandibulectomy/Reconstruct
	7642	Other Total Mandibulectomy
➡	7643	Other Reconstruction Mandible
	7644	Tot Ostect Oth Fac Bone/Reconst
	7645	Oth Tot Ostectomy Oth Fac Bone
➡	7646	Oth Reconstruct Oth Facial Bone
➡	765	Temporomandibular Arthroplasty
➡	7661	Cl Osteoplasty Mandibular Ramus
➡	7662	Op Osteoplasty Mandibular Ramus
➡	7663	Osteoplasty Of Body Of Mandible
➡	7664	Oth Orthognathic Surg Mandible
➡	7665	Segmental Osteoplasty Maxilla
➡	7666	Total Osteoplasty Of Maxilla
➡	7667	Reduction Genioplasty
➡	7668	Augmentation Genioplasty
➡	7669	Other Facial Bone Repair
	7670	Reduction Facial Fracture Nos
➡	7671	Cl Reductn Malar/Zygomat Fract

	Code #	Description
➡	7672	Op Reductn Malar/Zygomat Fract
	7673	Cl Reduction Maxillary Fracture
➡	7674	Op Reduction Maxillary Fracture
➡	7675	Cl Reductn Mandibular Fracture
➡	7676	Op Reductn Mandibular Fracture
➡	7677	Op Reduction Alveolar Fracture
➡	7678	Oth Cl Reductn Facial Fracture
➡	7679	Oth Op Reductn Facial Fracture
➡	7691	Bone Graft To Facial Bone
➡	7692	Insrt Synth Implant Facial Bone
➡	7693	Cl Reduct Temporomandib Disloc
➡	7694	Op Reduct Temporomandib Disloc
➡	7695	Other Manip Temporomandib Joint
	7696	Inject Ther Temporomandib Joint
➡	7697	Removal Int Fix Dev Facial Bone
➡	7699	Oth Operat Facial Bones/Joints
	7700	Sequestrectomy Unspecified Site
➡	7701	Sequestrectomy Scap/Clav/Thorax
➡	7702	Sequestrectomy Humerus
➡	7703	Sequestrectomy Radius And Ulna
➡	7704	Sequestrectomy Carpals/Metacarp
➡	7705	Sequestrectomy Femur
➡	7706	Sequestrectomy Patella
➡	7707	Sequestrectomy Tibia And Fibula
➡	7708	Sequestrectomy Tarsals/Metatars
➡	7709	Sequestrectomy Other Spec Site
➡	7710	Oth Incis Bone No Div Site Nos
➡	7711	Oth Incis Bone No Div Scap/Clav
➡	7712	Oth Incis Bone No Divis Humerus
➡	7713	Oth Incis Bone No Div Rad/Ulna

	Code #	Description
➡	7714	Oth Incis Bone No Div Met/Carp
➡	7715	Other Incis Bone No Divis Femur
➡	7716	Oth Incis Bone No Divis Patella
➡	7717	Oth Incis Bone No Divis Tib/Fib
➡	7718	Oth Incis Bone No Div Met/Tars
➡	7719	Oth Incis Bone No Div Oth Spec
	7720	Wedge Osteotomy Unspec Site
	7721	Wedge Osteotomy Scap/Clav/Thor
➡	7722	Wedge Osteotomy Humerus
	7723	Wedge Osteotomy Radius And Ulna
➡	7724	Wedge Osteotomy Carpal/Metacarp
	7725	Wedge Osteotomy Femur
➡	7726	Wedge Osteotomy Patella
	7727	Wedge Osteotomy Tibia/Fibula
➡	7728	Wedge Osteotomy Tarsal/Metatars
➡	7729	Wedge Osteotomy Other Spec Site
	7730	Other Division Bone Unspec Site
➡	7731	Oth Divis Bone Scap/Clav/Thorax
➡	7732	Other Division Bone Humerus
➡	7733	Other Division Bone Radius/Ulna
➡	7734	Oth Divis Bone Carpals/Metacarp
	7735	Other Division Bone Femur
➡	7736	Other Division Bone Patella
➡	7737	Oth Division Bone Tibia/Fibula
➡	7738	Oth Divis Bone Tarsals/Metatars
➡	7739	Oth Division Bone Oth Spec Site
➡	7740	Biopsy Of Bone Unspecified Site
➡	7741	Biopsy Scapula/Clavicle/Thorax
➡	7742	Biopsy Of Humerus
➡	7743	Biopsy Of Radius And Ulna

	Code #	Description
➡	7744	Biopsy Of Carpals/Metacarpals
➡	7745	Biopsy Of Femur
➡	7746	Biopsy Of Patella
➡	7747	Biopsy Of Tibia And Fibula
➡	7748	Biopsy Of Tarsals/Metatarsals
➡	7749	Biopsy Of Bone Other Spec Site
➡	7751	Bunionect/Tissue Corr/Osteotomy
➡	7752	Bunionect/Tiss Corr/Arthrodesis
➡	7753	Oth Bunionect/Soft Tiss Correct
➡	7754	Excision/Correction Bunionette
➡	7756	Repair Of Hammer Toe
➡	7757	Repair Of Claw Toe
➡	7758	Oth Excision/Fusion/Repair Toes
➡	7759	Other Bunionectomy
➡	7760	Loc Excision Les/Tiss Site Nos
➡	7761	Loc Excis Les/Tiss Sc/Clav/Thor
➡	7762	Local Excision Les/Tiss Humerus
➡	7763	Loc Excis Les/Tiss Radius/Ulna
➡	7764	Loc Excision Les/Tiss Met/Carp
➡	7765	Local Excision Les/Tissue Femur
➡	7766	Local Excision Les/Tiss Patella
➡	7767	Loc Excis Les/Tiss Tibia/Fibula
➡	7768	Loc Excision Les/Tiss Met/Tars
➡	7769	Loc Excision Les/Tiss Oth Spec
	7770	Excision Bone Graft Unspec Site
	7771	Excis Bone Graft Scap/Clav/Thor
	7772	Excision Bone For Graft Humerus
	7773	Excision Bone Graft Radius/Ulna
	7774	Excision Bone Graft Met/Carpals
	7775	Excision Bone For Graft Femur

	Code #	Description
➡	7776	Excision Bone For Graft Patella
	7777	Excis Bone Graft Tibia/Fibula
	7778	Excision Bone Graft Met/Tarsals
	7779	Excision Bone Graft Other Spec
	7780	Oth Partial Ostectomy Site Nos
➡	7781	Oth Part Ostectomy Sc/Clav/Thor
➡	7782	Other Partial Ostectomy Humerus
➡	7783	Oth Part Ostectomy Radius/Ulna
➡	7784	Oth Part Ostectomy Met/Carpals
➡	7785	Other Partial Ostectomy Femur
➡	7786	Other Partial Ostectomy Patella
➡	7787	Oth Part Ostectomy Tibia/Fibula
➡	7788	Oth Part Ostectomy Met/Tarsals
➡	7789	Oth Partial Ostectomy Oth Spec
	7790	Total Ostectomy Unspec Site
	7791	Total Ostectomy Scap/Clav/Thor
	7792	Total Ostectomy Humerus
	7793	Total Ostectomy Radius/Ulna
➡	7794	Total Ostectomy Carpal/Metacarp
	7795	Total Ostectomy Femur
➡	7796	Total Ostectomy Patella
	7797	Total Ostectomy Tibia/Fibula
➡	7798	Total Ostectomy Tarsal/Metatars
➡	7799	Total Ostectomy Other Spec Site
	7800	Bone Graft Unspecified Site
➡	7801	Bone Graft Scapula/Clav/Thorax
➡	7802	Bone Graft Humerus
➡	7803	Bone Graft Radius And Ulna
➡	7804	Bone Graft Carpals/Metacarpals
	7805	Bone Graft Femur

	Code #	Description
	7806	Bone Graft Patella
➡	7807	Bone Graft Tibia And Fibula
➡	7808	Bone Graft Tarsals/Metatarsals
➡	7809	Bone Graft Other Specified Site
➡	7810	Appl Ext Fix Device Unspec Site
➡	7811	App Ext Fix Scap/Clav/Thorax
➡	7812	Appl Ext Fix Device Humerus
➡	7813	Appl Ext Fix Device Radius/Ulna
➡	7814	Appl Ext Fix Dev Carp/Metacarp
	7815	Appl Ext Fix Device Femur
➡	7816	Appl Ext Fix Device Patella
➡	7817	Application Of External Fixation Device, Tibia And Fibula
➡	7818	Appl Ext Fix Dev Tars/Metatars
➡	7819	Appl Ext Fix Dev Oth Spec Site
➡	7820	Limb Shortening Unspec Site
	7822	Limb Shortening Proc Humerus
➡	7823	Limb Shortening Radius/Ulna
➡	7824	Limb Shortening Carp/Metacarpal
➡	7825	Limb Shortening Procedure Femur
➡	7827	Limb Shortening Proc Tib/Fib
➡	7828	Limb Shortening Tars/Metatarsal
➡	7829	Limb Shortening Oth Spec Bone
	7830	Limb Lenth Proc Unspec Site
	7832	Limb Length Proc Humerus
➡	7833	Limb Length Proc Radius/Ulna
	7834	Limb Length Proc Carp/Metacarp
➡	7835	Limb Length Proc Femur
➡	7837	Limb Length Proc Tib/Fib
➡	7838	Limb Length Proc Tars/Metatars
➡	7839	Limb Length Proc Oth Spec Bone

	Code #	Description
➡	7840	Oth Repair/Plast Op Unspec Site
➡	7841	Oth Repr/Plast Op Sc/Clav/Thor
➡	7842	Other Repair/Plastic Op Humerus
➡	7843	Oth Repair/Plast Op Radius/Ulna
➡	7844	Oth Repair/Plast Op Met/Carpals
	7845	Other Repair/Plastic Op Femur
➡	7846	Other Repair/Plastic Op Patella
➡	7847	Oth Repr/Plast Op Tibia/Fibula
➡	7848	Oth Repair/Plast Op Met/Tarsals
➡	7849	Oth Repr/Plast Op Oth Spec Site
	7850	Int Fix No # Reductn Site Nos
➡	7851	Int Fix No # Reductn Scap/Clav
➡	7852	Int Fix No # Reduction Humerus
➡	7853	Int Fix No # Reduction Rad/Ulna
➡	7854	Int Fix No # Reductn Met/Carpal
➡	7855	Int Fix No # Reduction Femur
➡	7856	Int Fix No # Reduction Patella
➡	7857	Int Fix No # Reductn Tibia/Fib
	7858	Int Fix No # Reductn Met/Tarsal
➡	7859	Int Fix No # Reductn Spec Site
➡	7860	Remov Implant Dev Bone Site Nos
➡	7861	Remov Implant Dev Sc/Clav/Thor
➡	7862	Removal Implant Device Humerus
➡	7863	Removal Implant Dev Radius/Ulna
➡	7864	Removal Implant Dev Met/Carpals
➡	7865	Removal Implant Device Femur
➡	7866	Removal Implant Device Patella
➡	7867	Remov Implant Dev Tibia/Fibula
➡	7868	Removal Implant Dev Met/Tarsals
➡	7869	Remov Implant Dev Bone Oth Spec

	Code #	Description
	7870	Osteoclasis Unspecified Site
	7871	Osteoclasis Scapula/Clav/Thorax
	7872	Osteoclasis Humerus
➡	7873	Osteoclasis Radius And Ulna
➡	7874	Osteoclasis Carpals/Metacarpals
	7875	Osteoclasis Femur
	7876	Osteoclasis Patella
➡	7877	Osteoclasis Tibia And Fibula
➡	7878	Osteoclasis Tarsals/Metatarsals
➡	7879	Osteoclasis Oth Specified Site
	7880	Dx Procedure On Unspec Bone NEC
	7881	Dx Proc Scapula/Clav/Thorax NEC
	7882	Dx Procedure On Humerus NEC
	7883	Dx Procedure On Radius/Ulna NEC
	7884	Dx Proc Carpals/Metacarpals NEC
	7885	Diagnostic Procedure Femur NEC
	7886	Dx Procedure On Patella NEC
	7887	Dx Procedure Tibia/Fibula NEC
	7888	Dx Proc Tarsals/Metatarsals NEC
	7889	Dx Procedure Oth Spec Bone NEC
➡	7890	Insert Growth Stim Unspec Bone
➡	7891	Insert Growth Stim Sc/Clav/Thor
➡	7892	Insertion Growth Stim Humerus
➡	7893	Insert Growth Stim Radius/Ulna
➡	7894	Insrt Growth Stim Carp/Metacarp
	7895	Insertion Growth Stim Femur
➡	7896	Insertion Growth Stim Patella
➡	7897	Insert Growth Stim Tibia/Fibula
➡	7898	Insrt Growth Stim Tars/Metatars
➡	7899	Insrt Growth Stim Oth Spec Bone

	Code #	Description
➡	7900	Cl Reduct # No Int Fix Bone Nos
➡	7901	Cl Reductn # No Int Fix Humerus
➡	7902	Cl Reduct # No Int Fix Rad/Ulna
➡	7903	Cl Reduct # No Int Fix Met/Carp
➡	7904	Cl Reduct # No Int Fix Phal Hnd
➡	7905	Cl Reduction # No Int Fix Femur
➡	7906	Cl Reductn # No Int Fix Tib/Fib
➡	7907	Cl Reduct # No Int Fix Met/Tars
➡	7908	Cl Reductn # No Int Fix Phal Ft
➡	7909	Cl Reduct # No Int Fix Oth Bone
	7910	Cl Reduction # Int Fix Bone Nos
➡	7911	Cl Reduction # Int Fix Humerus
➡	7912	Cl Reduct # Int Fix Radius/Ulna
➡	7913	Cl Reductn # Int Fix Met/Carpal
➡	7914	Cl Reductn # Int Fix Phal Hand
	7915	Cl Reductn # Internal Fix Femur
➡	7916	Cl Reductn # Int Fix Tibia/Fib
➡	7917	Cl Reductn # Int Fix Met/Tarsal
➡	7918	Cl Reductn # Int Fix Phal Foot
➡	7919	Cl Reduction # Int Fix Oth Bone
	7920	Op Reduct # No Int Fix Bone Nos
➡	7921	Op Reductn # No Int Fix Humerus
➡	7922	Op Reduct # No Int Fix Rad/Ulna
➡	7923	Op Reduct # No Int Fix Met/Carp
➡	7924	Op Reduct # No Int Fix Phal Hnd
	7925	Open Reductn # No Int Fix Femur
➡	7926	Op Reductn # No Int Fix Tib/Fib
➡	7927	Op Reduct # No Int Fix Met/Tars
➡	7928	Op Reductn # No Int Fix Phal Ft
➡	7929	Op Reduct # No Int Fix Oth Bone

	Code #	Description
➡	7930	Open Reductn # Int Fix Bone Nos
➡	7931	Open Reductn # Int Fix Humerus
➡	7932	Op Reduct # Int Fix Radius/Ulna
➡	7933	Op Reductn # Int Fix Met/Carpal
➡	7934	Op Reductn # Int Fix Phal Hand
	7935	Op Reductn # Internal Fix Femur
➡	7936	Op Reductn # Int Fix Tibia/Fib
➡	7937	Op Reductn # Int Fix Met/Tarsal
➡	7938	Op Reductn # Int Fix Phal Foot
➡	7939	Open Reductn # Int Fix Oth Bone
➡	7940	Cl Reduction Sep Epiph Bone Nos
➡	7941	Cl Reduction Sep Epiph Humerus
➡	7942	Cl Reduction Sep Epiph Rad/Ulna
➡	7945	Cl Reduction Sep Epiph Femur
➡	7946	Cl Reductn Sep Epiph Tibia/Fib
➡	7949	Cl Reduction Sep Epiph Oth Bone
➡	7950	Op Reduction Sep Epiph Bone Nos
➡	7951	Op Reduction Sep Epiph Humerus
➡	7952	Op Reduction Sep Epiph Rad/Ulna
➡	7955	Open Reduction Sep Epiph Femur
➡	7956	Op Reductn Sep Epiph Tibia/Fib
➡	7959	Op Reduction Sep Epiph Oth Bone
	7960	Debridement Open Fract Bone Nos
	7961	Debridement Open Fract Humerus
➡	7962	Debridement Open # Radius/Ulna
➡	7963	Debride Open # Carpals/Metacarp
➡	7964	Debridement Open # Phalang Hand
	7965	Debridement Open Fracture Femur
➡	7966	Debridement Open # Tibia/Fibula
	7967	Debride Open # Tarsals/Metatars

	Code #	Description
	7968	Debridement Open # Phalang Foot
➨	7969	Debridement Open Fract Oth Bone
➨	7970	Cl Reduct Dislocation Site Nos
➨	7971	Cl Reduct Dislocation Shoulder
➨	7972	Cl Reduction Dislocation Elbow
➨	7973	Cl Reduction Dislocation Wrist
➨	7974	Cl Reduct Dislocatn Hand/Finger
➨	7975	Cl Reduction Dislocation Hip
➨	7976	Cl Reduction Dislocation Knee
➨	7977	Cl Reduction Dislocation Ankle
➨	7978	Cl Reduct Dislocation Foot/Toe
➨	7979	Cl Reduct Dislocation Oth Site
	7980	Op Reduct Dislocation Site Nos
➨	7981	Op Reduct Dislocation Shoulder
➨	7982	Op Reduction Dislocation Elbow
➨	7983	Op Reduction Dislocation Wrist
➨	7984	Op Reduct Dislocatn Hand/Finger
	7985	Open Reduction Dislocation Hip
➨	7986	Open Reduction Dislocation Knee
➨	7987	Op Reduction Dislocation Ankle
➨	7988	Op Reduct Dislocation Foot/Toe
	7989	Op Reduct Dislocation Oth Site
	7990	Unspec Op Bone Injury Site Nos
	7991	Unspec Operation Humerus Injury
	7992	Unspec Operat Rad/Ulna Injury
	7993	Unspec Operat Met/Carp Injury
	7994	Unspec Operat Phal Hand Injury
	7995	Unspec Operation Femur Injury
	7996	Unspec Operat Tibia/Fib Injury
	7997	Unspec Operat Met/Tars Injury

	Code #	**Description**
	7998	Unspec Operat Phal Foot Injury
	7999	Unspec Operat Injury Oth Bone
	8000	Arthrot/Removal Prosth Site Nos
➡	8001	Arthrotomy/Remov Prosth Should
➡	8002	Arthrotomy/Removal Prosth Elbow
➡	8003	Arthrotomy/Removal Prosth Wrist
➡	8004	Arthrot/Remov Prosth Hand/Fing
	8005	Arthrotomy/Removal Prosth Hip
➡	8006	Arthrotomy/Removal Prosth Knee
➡	8007	Arthrotomy/Removal Prosth Ankle
➡	8008	Arthrot/Removal Prosth Foot/Toe
➡	8009	Arthrot/Removal Prosth Oth Site
➡	8010	Other Arthrotomy Unspec Site
➡	8011	Other Arthrotomy Of Shoulder
➡	8012	Other Arthrotomy Of Elbow
➡	8013	Other Arthrotomy Of Wrist
➡	8014	Other Arthrotomy Of Hand/Finger
➡	8015	Other Arthrotomy Of Hip
➡	8016	Other Arthrotomy Of Knee
➡	8017	Other Arthrotomy Of Ankle
➡	8018	Other Arthrotomy Of Foot/Toe
➡	8019	Other Arthrotomy Oth Spec Site
➡	8020	Arthroscopy Of Unspecified Site
➡	8021	Arthroscopy Of Shoulder
➡	8022	Arthroscopy Of Elbow
➡	8023	Arthroscopy Of Wrist
➡	8024	Arthroscopy Of Hand And Finger
➡	8025	Arthroscopy Of Hip
➡	8026	Arthroscopy Of Knee
➡	8027	Arthroscopy Of Ankle

	Code #	Description
	8028	Arthroscopy Of Foot And Toe
➡	8029	Arthroscopy Of Other Spec Site
➡	8030	Biopsy Joint Structure Site Nos
➡	8031	Biopsy Joint Structure Shoulder
➡	8032	Biopsy Joint Structure Of Elbow
➡	8033	Biopsy Joint Structure Of Wrist
➡	8034	Biopsy Joint Struct Hand/Finger
➡	8035	Biopsy Joint Structure Of Hip
➡	8036	Biopsy Joint Structure Of Knee
➡	8037	Biopsy Joint Structure Of Ankle
	8038	Biopsy Joint Structure Foot/Toe
➡	8039	Biopsy Joint Structure Oth Site
➡	8040	Div Jnt Caps/Lig/Cart Site Nos
➡	8041	Div Jnt Caps/Lig/Cart Shoulder
➡	8042	Divis Joint Caps/Lig/Cart Elbow
➡	8043	Divis Joint Caps/Lig/Cart Wrist
➡	8044	Div Jnt Caps/Lig/Cart Hand/Fing
	8045	Divis Joint Caps/Lig/Cart Hip
➡	8046	Divis Joint Caps/Lig/Cart Knee
➡	8047	Divis Joint Caps/Lig/Cart Ankle
➡	8048	Div Jnt Caps/Lig/Cart Foot/Toe
➡	8049	Div Jnt Caps/Lig/Cart Oth Site
➡	8050	Excis/Destr Intervert Disc Nos
➡	8051	Excision Of Intervertebral Disc
➡	8052	Intervertebral Chemonucleolysis
➡	8059	Oth Destruction Intervert Disc
➡	806	Excisn Semilunar Cartilage Knee
➡	8070	Synovectomy Of Unspecified Site
➡	8071	Synovectomy Of Shoulder
➡	8072	Synovectomy Of Elbow

	Code #	**Description**
➡	8073	Synovectomy Of Wrist
➡	8074	Synovectomy Of Hand And Finger
➡	8075	Synovectomy Of Hip
➡	8076	Synovectomy Of Knee
➡	8077	Synovectomy Of Ankle
➡	8078	Synovectomy Of Foot And Toe
	8079	Synovectomy Of Other Spec Site
➡	8080	Oth Excisn/Destr Les Joint Nos
➡	8081	Oth Excis/Destr Lesion Shoulder
➡	8082	Oth Excis/Destruct Lesion Elbow
➡	8083	Oth Excis/Destruct Lesion Wrist
➡	8084	Oth Excis/Destr Les Hand/Finger
➡	8085	Oth Excisn/Destruct Lesion Hip
➡	8086	Oth Excisn/Destruct Lesion Knee
➡	8087	Oth Excis/Destruct Lesion Ankle
➡	8088	Oth Excis/Destr Lesion Foot/Toe
➡	8089	Oth Excis/Destr Les Other Joint
➡	8090	Other Excision Unspec Joint
➡	8091	Other Excision Shoulder Joint
➡	8092	Other Excision Of Elbow Joint
➡	8093	Other Excision Of Wrist Joint
➡	8094	Oth Excision Hand/Finger Joint
	8095	Other Excision Of Hip Joint
➡	8096	Other Excision Of Knee Joint
➡	8097	Other Excision Of Ankle Joint
➡	8098	Other Excision Foot/Toe Joint
➡	8099	Other Excision Other Spec Joint
	8100	Spinal Fusion Nos
	8101	Atlas-Axis Spinal Fusion
	8102	Other Cervical Fusion Ant Tech

	Code #	Description
	8103	Other Cervical Fusion Post Tech
	8104	Dorsal/Dorsolumbar Fus Ant Tech
	8105	Dorsal/Dorsolumbr Fus Post Tech
	8106	Lumbar/Lumbosacral Fus Ant Tech
	8107	Lumbar/Lumbosacral Fus Lat Tech
	8108	Lumbar/Lumbosacrl Fus Post Tech
	8109	Refusion Spine Any Level/Tech
➡	8111	Ankle Fusion
	8112	Triple Arthrodesis
➡	8113	Subtalar Fusion
	8114	Midtarsal Fusion
➡	8115	Tarsometatarsal Fusion
➡	8116	Metatarsophalangeal Fusion
➡	8117	Other Fusion Of Foot
➡	8120	Arthrodesis Unspecified Joint
	8121	Arthrodesis Of Hip
	8122	Arthrodesis Of Knee
➡	8123	Arthrodesis Of Shoulder
	8124	Arthrodesis Of Elbow
➡	8125	Carporadial Fusion
➡	8126	Metacarpocarpal Fusion
➡	8127	Metacarpophalangeal Fusion
➡	8128	Interphalangeal Fusion
➡	8129	Arthrodesis Other Spec Joints
	8140	Repair Of Hip NEC
	8141	Revision of Acetabular Prosthesis
	8142	Five-In-One Repair Of Knee
	8143	Triad Knee Repair
➡	8144	Patellar Stabilization
➡	8145	Other Repair Cruciate Ligaments

	Code #	Description
➡	8146	Oth Repair Collateral Ligaments
➡	8147	Other Repair Of Knee
➡	8149	Other Repair Of Ankle
	8150	Revision of Total Hip Replacement
	8151	Total Hip Replacement
	8152	Partial Hip Replacement
	8154	Total Knee Replacement
	8155	Revision Of Knee Replacement
	8156	Total Ankle Replacement
➡	8157	Replacement Of Joint Foot/Toe
	8158	Revision of Femoral Head (endo) Prosthesis
➡	8159	Revis Joint Repl Low Extrem NEC
➡	8171	Arthr Metacarp/Interphal W Impl
➡	8172	Arthr Metacarp/Interphl No Impl
➡	8173	Total Wrist Replacement
➡	8174	Arthr Carpocarp/Carpomet W Impl
➡	8175	Arthr Carpocar/Carpomet No Impl
➡	8179	Other Repair Hand/Fingers/Wrist
➡	8180	Total Shoulder Replacement
➡	8181	Partial Shoulder Replacement
➡	8182	Repr Recurrent Dislocatn Should
➡	8183	Other Repair Of Shoulder
	8184	Total Elbow Replacement
➡	8185	Other Repair Of Elbow
➡	8191	Arthrocentesis
	8192	Inject Ther Subst In Joint/Lig
➡	8193	Suture Caps/Lig Upper Extremity
➡	8194	Suture Capsule/Lig Ankle/Foot
➡	8195	Suture Caps/Lig Oth Low Extrem
➡	8196	Other Repair Of Joint

	Code #	Description
➡	8197	Revis Joint Replac Upper Extrem
➡	8198	Oth Dx Procedures Joint Struct
➡	8199	Oth Operations Joint Structures
➡	8201	Exploration Tendon Sheath Hand
➡	8202	Myotomy Of Hand
	8203	Bursotomy Of Hand
➡	8204	Incis/Drain Palmar/Thenar Space
➡	8209	Other Incision Soft Tissue Hand
➡	8211	Tenotomy Of Hand
➡	8212	Fasciotomy Of Hand
➡	8219	Other Division Soft Tissue Hand
➡	8221	Excision Les Tendon Sheath Hand
➡	8222	Excision Lesion Muscle Of Hand
➡	8229	Excision Oth Les Soft Tiss Hand
➡	8231	Bursectomy Of Hand
	8232	Excision Tendon Hand For Graft
➡	8233	Other Tenonectomy Of Hand
	8234	Excisn Muscle/Fascia Hand-Graft
➡	8235	Other Fasciectomy Of Hand
➡	8236	Other Myectomy Of Hand
➡	8239	Other Excision Soft Tissue Hand
➡	8241	Suture Of Tendon Sheath Of Hand
➡	8242	Delayed Suture Flexor Tend Hand
➡	8243	Delayed Suture Oth Tendon Hand
➡	8244	Other Suture Flexor Tendon Hand
➡	8245	Other Suture Other Tendon Hand
➡	8246	Suture Of Muscle/Fascia Of Hand
➡	8251	Advancement Of Tendon Of Hand
	8252	Recession Of Tendon Of Hand
➡	8253	Reattachment Of Tendon Of Hand

	Code #	Description
	8254	Reattachment Of Muscle Of Hand
➡	8255	Oth Change Hand Musc/Tend Leng
➡	8256	Oth Hand Tend Transfer/Transpl
	8257	Other Hand Tendon Transposition
➡	8258	Oth Hand Musc Transfer/Transpl
	8259	Other Hand Muscle Transposition
➡	8261	Pollicizatn/Carryover Neurovasc
➡	8269	Other Reconstruction Of Thumb
➡	8271	Tendon Pulley Reconstruct Hand
➡	8272	Plast Op Hand W Graft Musc/Fasc
➡	8279	Plast Op Hand W Oth Graft/Impl
➡	8281	Transfer Of Finger Except Thumb
	8282	Repair Of Cleft Hand
➡	8283	Repair Of Macrodactyly
➡	8284	Repair Of Mallet Finger
➡	8285	Other Tenodesis Of Hand
➡	8286	Other Tenoplasty Of Hand
➡	8289	Other Plastic Operation On Hand
➡	8291	Lysis Of Adhesions Of Hand
	8292	Aspiration Of Bursa Of Hand
	8293	Aspiration Oth Soft Tissue Hand
	8294	Injection Ther Subst Bursa Hand
	8295	Inject Ther Subst Tendon Hand
	8296	Oth Inject Ther Subst Tiss Hand
➡	8299	Oth Op Muscle/Tend/Fascia Hand
➡	8301	Exploration Of Tendon Sheath
➡	8302	Myotomy
➡	8303	Bursotomy
➡	8309	Other Incision Of Soft Tissue
➡	8311	Achillotenotomy

	Code #	Description
➡	8312	Adductor Tenotomy Of Hip
➡	8313	Other Tenotomy
➡	8314	Fasciotomy
➡	8319	Other Division Of Soft Tissue
➡	8321	Biopsy Of Soft Tissue
➡	8329	Oth Dx Proc Musc/Tend/Fasc/Burs
➡	8331	Excision Lesion Tendon Sheath
➡	8332	Excision Of Lesion Of Muscle
➡	8339	Excision Lesion Oth Soft Tissue
	8341	Excision Of Tendon For Graft
➡	8342	Other Tenonectomy
	8343	Excisn Muscle/Fascia For Graft
➡	8344	Other Fasciectomy
➡	8345	Other Myectomy
➡	8349	Other Excision Of Soft Tissue
➡	835	Bursectomy
➡	8361	Suture Of Tendon Sheath
➡	8362	Delayed Suture Of Tendon
➡	8363	Rotator Cuff Repair
➡	8364	Other Suture Of Tendon
➡	8365	Other Suture Muscle Or Fascia
➡	8371	Advancement Of Tendon
	8372	Recession Of Tendon
➡	8373	Reattachment Of Tendon
➡	8374	Reattachment Of Muscle
➡	8375	Tendon Transfer/Transplantation
	8376	Other Tendon Transposition
➡	8377	Muscle Transfer/Transplantation
	8379	Other Muscle Trasnposition
➡	8381	Tendon Graft

	Code #	Description
➡	8382	Graft Of Muscle Or Fascia
➡	8383	Tendon Pulley Reconstruction
➡	8384	Release Of Clubfoot NEC
➡	8385	Oth Change Muscle/Tendon Length
➡	8386	Quadricepsplasty
➡	8387	Other Plastic Operations Muscle
➡	8388	Other Plastic Operations Tendon
➡	8389	Other Plastic Operations Fascia
➡	8391	Lysis Adhes Musc/Tend/Fasc/Burs
	8392	Insrt/Replac Skeletal Musc Stim
	8393	Removal Of Skeletal Muscle Stim
	8394	Aspiration Of Bursa
	8395	Aspiration Of Other Soft Tissue
	8396	Injection Ther Subst Into Bursa
	8397	Injection Ther Subst In Tendon
	8398	Inject Ther Subst Oth Soft Tiss
➡	8399	Oth Op Muscle/Tend/Fascia/Bursa
	8400	Upper Limb Amputation Nos
➡	8401	Amputation/Disarticulatn Finger
➡	8402	Amputation/Disarticulatn Thumb
	8403	Amputation Through Hand
	8404	Disarticulation Of Wrist
	8405	Amputation Through Forearm
	8406	Disarticulation Of Elbow
	8407	Amputation Through Humerus
	8408	Disarticulation Of Shoulder
	8409	Interthoracoscapular Amputation
	8410	Lower Limb Amputation Nos
➡	8411	Amputation Of Toe
	8412	Amputation Through Foot

	Code #	Description
	8413	Disarticulation Of Ankle
	8414	Amput Ankle Thru Malleo Tib/Fib
	8415	Other Amputation Below Knee
	8416	Disarticulation Of Knee
	8417	Amputation Above Knee
	8418	Disarticulation Of Hip
	8419	Abdominopelvic Amputation
➡	8421	Thumb Reattachment
➡	8422	Finger Reattachment
	8423	Forearm/Wrist/Hand Reattachment
	8424	Upper Arm Reattachment
	8425	Toe Reattachment
	8426	Foot Reattachment
	8427	Lower Leg Or Ankle Reattachment
	8428	Thigh Reattachment
	8429	Other Reattachment
➡	843	Revision Of Amputation Stump
	8440	Implant/Fit Prosth Limb Dev Nos
	8441	Fitting Prosth Upper Arm/Should
	8442	Fitting Prosth Lower Arm/Hand
	8443	Fitting Prosthesis Of Arm Nos
	8444	Implantation Prosth Device Arm
	8445	Fitting Prosthesis Above Knee
	8446	Fitting Prosthesis Below Knee
	8447	Fitting Prosthesis Of Leg Nos
	8448	Implantation Prosth Device Leg
	8491	Amputation Nos
	8492	Separat Equal Conjoined Twins
	8493	Separat Unequal Conjoined Twins
➡	8499	Other Op Musculoskeletal System

	Code #	Description
➡	850	Mastotomy
➡	8511	Closed Biopsy Of Breast
➡	8512	Open Biopsy Of Breast
➡	8519	Other Dx Procedures On Breast
➡	8520	Excis/Destr Breast Tissue Nos
➡	8521	Local Excision Lesion Of Breast
➡	8522	Resection Of Quadrant Of Breast
➡	8523	Subtotal Mastectomy
➡	8524	Excision Ectopic Breast Tissue
➡	8525	Excision Of Nipple
➡	8531	Unilateral Reduct Mammoplasty
➡	8532	Bilateral Reduction Mammoplasty
➡	8533	Unil Subcu Mammectomy W Implant
➡	8534	Oth Unilateral Subcu Mammectomy
➡	8535	Bilat Subcu Mammectomy/Implant
➡	8536	Oth Bilateral Subcu Mammectomy
➡	8541	Unilateral Simple Mastectomy
➡	8542	Bilateral Simple Mastectomy
➡	8543	Unilat Extended Simple Mastect
	8544	Bilat Extended Simple Mastect
	8545	Unilateral Radical Mastectomy
	8546	Bilateral Radical Mastectomy
	8547	Unilat Extended Rad Mastectomy
	8548	Bilat Extended Rad Mastectomy
➡	8550	Augmentation Mammoplasty Nos
➡	8551	Unilat Injection Breast Augment
➡	8552	Bilat Injection Breast Augment
➡	8553	Unilateral Breast Implant
➡	8554	Bilateral Breast Implant
➡	856	Mastopexy

	Code #	Description
➡	857	Total Reconstruction Of Breast
➡	8581	Suture Of Laceration Of Breast
	8582	Split Thickness Skin Grf Breast
➡	8583	Full Thickness Skin Grf Breast
➡	8584	Pedicle Graft To Breast
	8585	Muscle Flap Graft To Breast
➡	8586	Transposition Of Nipple
➡	8587	Other Repair/Reconstruct Nipple
➡	8589	Other Mammoplasty
➡	8591	Aspiration Of Breast
	8592	Injection Ther Agent In Breast
➡	8593	Revision Of Implant Of Breast
➡	8594	Removal Of Implant Of Breast
➡	8595	Insert Breast Tissue Expander
➡	8596	Removal Breast Tissue Expander
➡	8599	Other Operations On The Breast
	8601	Aspirat Skin/Subcutaneous Tiss
➡	8602	Inject/Tattoo Skin Les/Defect
➡	8603	Incision Pilonidal Sinus/Cyst
➡	8604	Oth Incis W Drainage Skin/Subcu
➡	8605	Incision W Remov Fb Skin/Subcu
➡	8606	Insert Tot Implant Infusn Pump
➡	8607	Insert Tot Impl Vasc Access Dev
➡	8609	Oth Incision Of Skin/Subcu Tiss
➡	8611	Biopsy Skin/Subcutaneous Tissue
	8619	Other Dx Proc Skin/Subcu Tissue
➡	8621	Excision Pilonidal Cyst/Sinus
➡	8622	Excis Debride Wound/Infect/Burn
➡	8623	Removal Nail/Nail Bed/Nail Fold
➡	8624	Chemosurgery Of Skin

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	Code #	Description
➡	8625	Dermabrasion
➡	8626	Ligation Of Dermal Appendage
➡	8627	Debride Nail/Nail Bed/Nail Fold
➡	8628	Nonexcs Debride Wnd/Infect/Burn
➡	863	Oth Excis/Destr Les Skin/Subcu
➡	864	Radical Excision Of Skin Lesion
➡	8651	Replantation Of Scalp
➡	8659	Suture Skin/Subcu Tiss Oth Site
➡	8660	Free Skin Graft Nos
➡	8661	Full Thickness Skin Graft Hand
➡	8662	Other Skin Graft To Hand
➡	8663	Full Thick Skin Graft Oth Site
➡	8664	Hair Transplant
	8665	Heterograft To Skin
➡	8666	Homograft To Skin
	8667	Dermal Regenerative Graft
➡	8669	Other Skin Graft To Other Sites
➡	8670	Pedicle Or Flap Graft Nos
➡	8671	Cutting/Prep Pedicle Graft/Flap
➡	8672	Advancement Of Pedicle Graft
➡	8673	Attach Pedicle/Flap Graft Hand
➡	8674	Attach Ped/Flap Graft Oth Site
➡	8675	Revision Of Pedicle/Flap Graft
➡	8681	Repair For Facial Weakness
➡	8682	Facial Rhytidectomy
➡	8683	Size Reduct Plastic Operation
➡	8684	Relaxation Scar/Contract Skin
➡	8685	Correction Of Syndactyly
➡	8686	Onychoplasty
➡	8689	Other Repair/Reconst Skin/Subcu

	Code #	Description
➡	8691	Excision Of Skin For Graft
➡	8692	Electrolysis/Oth Epilation Skin
➡	8693	Insertion Of Tissue Expander
➡	8699	Oth Operation Skin/Subcu Tissue
I	8701	Pneumoencephalogram
I	8702	Oth Contr Radiogram Brain/Skull
➡	8703	Comput Axial Tomography Of Head
➡	8704	Other Tomography Of Head
I	8705	Contrast Dacryocystogram
I	8706	Contrast Radiogram Nasopharynx
I	8707	Contrast Laryngogram
➡	8708	Cervical Lymphangiogram
I	8709	Oth Soft Tiss Xray Face/Hd/Neck
	8711	Full Mouth Xray Of Teeth
	8712	Other Dental Xray
I	8713	Temporomandib Contr Arthrogram
I	8714	Contrast Radiogram Of Orbit
I	8715	Contrast Radiogram Of Sinus
I	8716	Other Xray Of Facial Bones
I	8717	Other Xray Of Skull
➡	8721	Contrast Myelogram
I	8722	Other Xray Of Cervical Spine
I	8723	Other Xray Of Thoracic Spine
I	8724	Other Xray Of Lumbosacral Spine
I	8729	Other Xray Of Spine
I	8731	Endotracheal Bronchogram
I	8732	Other Contrast Bronchogram
I	8733	Mediastinal Pneumogram
➡	8734	Intrathoracic Lymphangiogram
I	8735	Contrast Radiogram Mammary Duct

	Code #	Description
I	8736	Xerography Of Breast
I	8737	Other Mammography
I	8738	Sinogram Of Chest Wall
I	8739	Oth Soft Tissue Xray Chest Wall
➡	8741	Comput Axial Tomography Thorax
I	8742	Other Tomography Of Thorax
I	8743	Xray Of Ribs/Sternum/Clavicle
I	8744	Routine Chest Xray So Described
I	8749	Other Chest Xray
➡	8751	Percutan Hepatic Cholangiogram
➡	8752	Intravenous Cholangiogram
➡	8753	Intraoperative Cholangiogram
I	8754	Other Cholangiogram
I	8759	Other Biliary Tract Xray
I	8761	Barium Swallow
I	8762	Upper GI Series
I	8763	Small Bowel Series
I	8764	Lower GI Series
I	8765	Other Xray Of Intestine
➡	8766	Contrast Pancreatogram
I	8769	Other Digestive Tract Xray
➡	8771	Comput Axial Tomography Kidney
I	8772	Other Nephrotomogram
I	8773	Intravenous Pyelogram
➡	8774	Retrograde Pyelogram
➡	8775	Percutaneous Pyelogram
I	8776	Retrograde Cystourethrogram
I	8777	Other Cystogram
I	8778	Ileal Conduitogram
I	8779	Other Xray Of Urinary System

	Code #	Description
I	8781	Xray Of Gravid Uterus
I	8782	Gas Contr Hysterosalpingogram
I	8783	Opaque Dye Contr Hysterosalping
I	8784	Percutaneous Hysterogram
I	8785	Oth Xray Fallopian Tubes/Uterus
I	8789	Oth Xray Female Genital Organs
I	8791	Contrast Seminal Vesiculogram
I	8792	Oth Xray Prost/Seminal Vesicles
I	8793	Contrast Epididymogram
➡	8794	Contrast Vasogram
I	8795	Oth Xray Epididymis/Vas Deferen
I	8799	Other Xray Male Genital Organs
➡	8801	Comput Axial Tomography Abdomen
I	8802	Other Abdominal Tomography
I	8803	Sinogram Of Abdominal Wall
➡	8804	Abdominal Lymphangiogram
I	8809	Oth Soft Tissue Xray Abdom Wall
I	8811	Pelv Opaque Dye Contr Radiogram
I	8812	Pelvic Gas Contrast Radiography
I	8813	Other Peritoneal Pneumogram
I	8814	Retroperitoneal Fistulogram
I	8815	Retroperitoneal Pneumogram
I	8816	Other Retroperitoneal Xray
I	8819	Other Xray Of Abdomen
I	8821	Skeletal Xray Shoulder/Upp Arm
I	8822	Skeletal Xray Elbow And Forearm
I	8823	Skeletal Xray Of Wrist And Hand
I	8824	Skeletal Xray Of Upper Limb NOS
I	8825	Pelvimetry
I	8826	Other Skeletal Xray Pelvis/Hip

	Code #	Description
I	8827	Skelet Xray Thigh/Knee/Low Leg
I	8828	Skeletal Xray Of Ankle And Foot
I	8829	Skeletal Xray Of Lower Limb NOS
I	8831	Skeletal Series
I	8832	Contrast Arthrogram
I	8833	Other Skeletal Xray
➡	8834	Lymphangiogram Of Upper Limb
I	8835	Oth Soft Tissue Xray Upper Limb
➡	8836	Lymphangiogram Of Lower Limb
I	8837	Oth Soft Tissue Xray Lower Limb
➡	8838	Other Comput Axial Tomography
I	8839	Xray Other And Unspecified
➡	8840	Arteriography W Contr Site Nos
➡	8841	Arteriography Cerebral Arteries
➡	8842	Aortography
➡	8843	Arteriograph Pulmonary Arteries
➡	8844	Arteriograph Oth Intrathor Vess
➡	8845	Arteriography Of Renal Arteries
➡	8846	Arteriography Of Placenta
➡	8847	Arteriography Oth Intraabd Art
➡	8848	Arteriograph Fem/Low Extrem Art
➡	8849	Arteriography Other Spec Sites
➡	8850	Angiocardiography Nos
➡	8851	Angiocardiography Venae Cavae
➡	8852	Angiocardiograph R Heart Struct
➡	8853	Angiocardiograph L Heart Struct
➡	8854	Combin R/L Hrt Angiocardiograph
➡	8855	Coronary Arteriograph Sing Cath
➡	8856	Coronary Arteriography Two Cath
➡	8857	Oth/Nos Coronary Arteriography

	Code #	Description
➡	8858	Negative Contr Cardiac Roentgen
➡	8860	Phlebography W Contr Site Nos
➡	8861	Phlebography Head/Neck W Contr
➡	8862	Phlebography Pulmonary W Contr
➡	8863	Phlebograph Oth Intrathor/Contr
➡	8864	Phlebography Portal Sys W Contr
➡	8865	Phlebography Oth Intraabd/Contr
➡	8866	Phlebograph Fem/Low Extrem/Cont
➡	8867	Phlebograph Oth Spec Site/Contr
➡	8868	Impedance Phlebography
I	8871	Diagnostic Ultrasound Head/Neck
I	8872	Diagnostic Ultrasound Of Heart
I	8873	Dx Ultrasound Oth Sites Thorax
I	8874	Dx Ultrasound Digestive System
I	8875	Dx Ultrasound Of Urinary System
I	8876	Dx Ultrasound Abdomen/Retroper
I	8877	Dx Ultrasound Periph Vasc Sys
I	8878	Dx Ultrasound Of Gravid Uterus
I	8879	Other Diagnostic Ultrasound
	8881	Cerebral Thermography
	8882	Ocular Thermography
	8883	Bone Thermography
	8884	Muscle Thermography
	8885	Breast Thermography
	8886	Blood Vessel Thermography
	8889	Thermography Of Other Sites
I	8890	Diagnostic Imaging NEC
➡	8891	Mri Of Brain And Brain Stem
➡	8892	Mri Of Chest And Myocardium
➡	8893	Mri Of Spinal Cord

	Code #	Description
➡	8894	Mri Musculoskeletal Structures
➡	8895	Mri Of Pelvis/Prostate/Bladder
➡	8897	Mri Of Other/Unspecified Sites
➡	8898	Bone Mineral Density Studies
	8901	"Dx Interview/Evaluation Brief, 0-15 Min.,"
	8902	"Dx Interview/Evaluation Limited, 16-30 Min.,"
	8903	"Dxinterview/Eval Comprehensive, 31-60 Min.,"
	8904	Other Interview And Evaluation
	8905	Dx Interview And Evaluation Nos
	8906	"Consultation Limited, 16-30 Min., (Physician)"
	8907	"Consultation Comprehensive, 31-60 Min.,"
	8908	"Other Consultation, 0-15 Min., (Physician)"
	8909	Consultation Nos
I	8910	Intracarotid Amobartital Test
	8911	Tonometry
	8912	Nasal Function Study
	8913	Neurologic Examination
I	8914	Electroencephalogram
	8915	Oth Nonop Neurologic Funct Test
	8916	Transillumination Of Nb Skull
➡	8917	Polysomnogram
➡	8918	Oth Sleep Disord Function Tests
I	8919	Video/Radio Electroenceph Montr
➡	8921	Urinary Manometry
➡	8922	Cystometrogram
➡	8923	Urethral Sphinct Electromyogram
➡	8924	Uroflowmetry
➡	8925	Urethral Pressure Profile
	8926	Gynecological Examination
➡	8929	Oth Nonop Gu System Measurement

	Code #	Description
	8931	Dental Examination
	8932	Esophageal Manometry
	8933	Digital Exam Enterostomy Stoma
	8934	Digital Examination Of Rectum
	8935	Transillumination Nasal Sinuses
	8936	Manual Examination Of Breast
	8937	Vital Capacity Determination
	8938	Other Nonop Respiratory Measur
	8939	Other Nonop Measurements/Exams
I	8941	Cv Stress Test Using Treadmill
I	8942	Masters' Two-Step Stress Test
I	8943	Cv Stress Test Bicycle Ergometr
I	8944	Oth Cardiovascular Stress Test
	8945	Artificial Pacemaker Rate Check
	8946	Pacmkr Artifact Wave Form Check
	8947	Pacmkr Electrode Impedance Chck
	8948	Pacmkr Volt/Amp Threshold Check
	8950	Ambulatory Cardiac Monitoring
	8951	Rhythm Electrocardiogram
	8952	Other Electrocardiogram
	8953	Vectorcardiogram (With Ecg)
	8954	Electrographic Monitoring Heart
	8955	Phonocardiogram With Ecg Lead
	8956	Carotid Pulse Tracing Ecg Lead
	8957	Apexcardiogram (With Ecg Lead)
	8958	Plethysmogram
	8959	Other Nonop Cardiac/Vasc Measur
	8961	Systemic Arterial Press Monitor
	8962	Central Venous Pressure Monitor
	8963	Pulmonary Artery Press Monitor

	Code #	Description
	8964	Pulmonary Artery Wedge Monitor
	8965	Measur System Arter Blood Gases
	8966	Measur Mixed Venous Blood Gases
	8967	Monitor Card Output Oxyg Consum
	8968	Monitor Cardiac Output Oth Tech
	8969	Monitoring Coronary Blood Flow
	897	General Physical Examination
	898	Autopsy
➡	9201	Thyroid Scan And Function Study
➡	9202	Liver Scan/Radiois Funct Study
➡	9203	Renal Scan/Radiois Funct Study
➡	9204	Gi Scan/Radioisotope Funct Stdy
➡	9205	Cv/Hemat Scan/Radiois Funct St
➡	9209	Other Radioisotope Funct Study
➡	9211	Cerebral Radioisotope Scan
➡	9212	Radioisotope Scan Oth Site Head
➡	9213	Parathyroid Radioisotope Scan
➡	9214	Bone Radioisotope Scan
➡	9215	Pulmonary Radioisotope Scan
➡	9216	Radioisotope Scan Lymphatic Sys
➡	9217	Placental Radioisotope Scan
➡	9218	Total Body Radioisotope Scan
➡	9219	Radioisotope Scan Other Sites
➡	9221	Superficial Radiation
➡	9222	Orthovoltage Radiation
➡	9223	Radioisotopic Teleradiotherapy
➡	9224	Teleradiotherapy Using Photons
➡	9225	Teleradiotherapy Using Eletrons
➡	9226	Teleradiother Oth Partic Radiat
➡	9227	Implant/Insert Radioactive Elem

	Code #	Description
➡	9228	Injection/Instill Radioisotopes
➡	9229	Oth Radiotherapeutic Procedure
	9230	Stereotactic Radiosurgery Not Otherwise Specified
	9231	Single Source Photon Radiosurgery
	9232	Multi-Source Photon Radiosurgery
	9233	Particulate Radiosurgery
	9239	"Stereotactic Radiosurgery, Not Elsewhere Classified"
	9301	Functional Evaluation
	9302	Orthotic Evaluation
	9303	Prosthetic Evaluation
	9304	Manual Testing Muscle Function
	9305	Range Of Motion Testing
	9306	Measurement Of Limb Length
	9307	Body Measurement
	9308	Electromyography
	9309	Other Dx Physical Therapy Proc
	9311	Assisting Exercise
	9312	Oth Active Musculoskel Exercise
	9313	Resistive Exercise
	9314	Training In Joint Movements
	9315	Mobilization Of Spine
	9316	Mobilization Of Other Joint
	9317	Oth Passive Musculoskel Exercis
	9318	Breathing Exercise
	9319	Exercise NEC
	9321	Manual And Mechanical Traction
	9322	Ambulation And Gait Training
	9323	Fitting Of Orthotic Device
	9324	Training Prosth/Orthotic Device
	9325	Forced Extension Of Limb

	Code #	Description
	9326	Manual Rupture Joint Adhesions
	9327	Stretching Of Muscle Or Tendon
	9328	Stretching Of Fascia
	9329	Oth Forcible Correctn Deformity
	9331	Assisted Exercise In Pool
	9332	Whirlpool Treatment
	9333	Other Hydrotherapy
	9334	Diathermy
	9335	Other Heat Therapy
	9336	Cardiac Retraining
	9337	Prenatal Training
	9338	Combined Physical Therapy Nos
	9339	Other Physical Therapy
	9341	Spinal Traction W Skull Device
	9342	Other Spinal Traction
	9343	Intermittent Skeletal Traction
	9344	Other Skeletal Traction
	9345	Thomas' Splint Traction
	9346	Other Skin Traction Of Limbs
	9351	Application Of Plaster Jacket
	9352	Application Of Neck Support
	9353	Application Of Other Cast
	9354	Application Of Splint
➡	9355	Dental Wiring
	9356	Application Pressure Dressing
	9357	Application Oth Wound Dressing
	9358	Application Pressure Trousers
	9359	Oth Immobiliz/Press/Attent Wnd
	9361	Osteopath Manip General Mobil
	9362	Osteopath Manip Hi-Vel/Low-Amp

	Code #	Description
	9363	Osteopath Manip Low-Vel/Hi-Amp
	9364	Osteopath Manip Isotonic/Isomet
	9365	Osteopath Manip Indirect Forces
	9366	Osteopath Manip Move Tiss Fluid
	9367	Oth Osteopathic Manip Treatment
	9371	Dyslexia Training
	9372	Dysphasia Training
	9373	Esophageal Speech Training
	9374	Speech Defect Training
	9375	Oth Speech Training And Therapy
	9376	Train Use Of Lead Dog For Blind
	9377	Training In Braille Or Moon
	9378	Oth Rehabilitation For Blind
	9381	Recreational Therapy
	9382	Educational Therapy
	9383	Occupational Therapy
	9384	Music Therapy
	9385	Vocational Rehabilitation
	9389	Rehabilitation NEC
➡	9390	Contin Positive Airway Pressure
	9391	Intermit Pos Pressure Breathing
	9393	Nonmechanical Meth Resuscitatn
	9394	Resp Medication By Nebulizer
	9395	Hyperbaric Oxygenation
	9396	Other Oxygen Enrichment
	9397	Decompression Chamber
	9398	Oth Contr Atmospher Press/Comp
	9399	Other Respiratory Procedures
➡	9427	Other Electroshock Therapy
➡	9442	Family Therapy

	Code #	Description
	9449	"Other Counselling, (Physician)"
	9501	Limited Eye Examination
	9502	Comprehensive Eye Examination
	9503	Extended Ophthalmologic Work-Up
➡	9504	Eye Examination Under Anesth
	9505	Visual Field Study
	9506	Color Vision Study
	9507	Dark Adaptation Study
	9509	Eye Examination Nos
	9511	Fundus Photography
I	9512	Fluor Angiography/Angioscpy Eye
I	9513	Ultrasound Study Of Eye
I	9514	Xray Study Of Eye
	9515	Ocular Motility Study
➡	9516	P32/Other Tracer Studies Of Eye
	9521	Electroretinogram
	9522	Electro-Oculogram
	9523	Visual Evoked Potential
	9524	Electonystagmogram
	9525	Electromyogram Of Eye
	9526	Tonography/Prov/Oth Glauc Test
	9531	Fitting/Dispensing Spectacles
	9532	Prescrpt/Fit/Dispens Cont Lens
	9533	Dispensing Oth Low Vision Aids
	9534	Ocular Prosthetics
	9535	Orthoptic Training
	9536	Ophthalmologic Counsel/Instruct
	9541	Audiometry
	9542	Clinical Test Of Hearing
	9543	Audiological Evaluation

	Code #	Description
	9544	Clinical Vestibular Funct Tests
	9545	Rotation Tests
	9546	Oth Auditory/Vestib Funct Tests
	9547	Hearing Examination Nos
	9548	Fitting Of Hearing Aid
	9549	Oth Nonop Proc Hearing Related
	9601	Insertion Nasopharyngeal Airway
	9602	Insertion Oropharyngeal Airway
	9603	Insert Esoph Obturator Airway
➡	9604	Insertion Of Endotracheal Tube
	9605	Oth Intubatn Respiratory Tract
➡	9606	Insertion Of Sengstaken Tube
➡	9607	Insert Oth (Naso-)Gastric Tube
➡	9608	Insert (Naso-)Intestinal Tube
	9609	Insertion Of Rectal Tube
	9611	Packing External Auditory Canal
➡	9614	Vaginal Packing
	9615	Insertion Of Vaginal Mold
➡	9616	Other Vaginal Dilation
	9617	Insertion Of Vaginal Diaphragm
➡	9618	Insertion Other Vaginal Pessary
	9619	Rectal Packing
	9621	Dilation Of Frontonasal Duct
➡	9622	Dilation Of Rectum
➡	9623	Dilation Of Anal Sphincter
➡	9624	Dilatn/Manip Enterostomy Stoma
➡	9625	Therapeutic Distention Bladder
	9626	Man Reduction Rectal Prolapse
	9627	Manual Reduction Of Hernia
	9628	Man Reductn Enterostomy Prolap

	Code #	Description
	9629	Reduction Of Intussusception Of Alimentary Tract
	9631	Gastric Cooling
	9632	Gastric Freezing
➡	9633	Gastric Lavage
	9634	Oth Irrigat (Naso-)Gastric Tube
➡	9635	Gastric Gavage
	9636	Irrigat Gastrostomy/Enterostomy
	9637	Proctoclysis
➡	9638	Removal Of Impacted Feces
	9639	Other Transanal Enema
	9641	Irrigat Cholecystostomy/Biliary
	9642	Irrigation Of Pancreatic Tube
	9643	Digest Instill Exc Gast Gavage
	9644	Vaginal Douche
	9645	Irrigat Nephrostomy/Pyelostomy
	9646	Irrigat Ureterostomy/Uret Cath
	9647	Irrigation Of Cystostomy
	9648	Irrigat Oth Indwell Urin Cath
➡	9649	Oth Genitourinary Instillation
➡	9651	Irrigation Of Eye
	9652	Irrigation Of Ear
➡	9653	Irrigation Of Nasal Passages
➡	9654	Dental Scaling/Polishing/Debrid
	9655	Tracheostomy Toilette
➡	9656	Other Lavage Bronchus/Trachea
	9657	Irrigation Of Vascular Catheter
	9658	Irrigation Of Wound Catheter
	9659	Other Irrigation Of Wound
➡	966	Enteral Infus Conc Nutrit Subst
	9670	Contin Mech Vent Unspec Durat

	Code #	Description
	9671	Contin Mech Vent < 96 Cons Hrs
	9672	Contin Mech Vent >= 96 Cons Hrs
➡	9701	Replace Gastric/Esophagost Tube
➡	9702	Replacement Gastrostomy Tube
➡	9703	Replace Tube/Dev Small Intest
➡	9704	Replace Tube/Dev Large Intest
➡	9705	Replace Stent Bil/Pancreat Duct
	9711	Replacement Of Cast Upper Limb
	9712	Replacement Of Cast Lower Limb
	9713	Replacement Of Other Cast
	9714	Replace Oth Dev Ms Immobilizatn
	9715	Replacement Of Wound Catheter
	9716	Replacement Wound Packing/Drain
	9721	Replacement Of Nasal Packing
	9722	Replacement Of Dental Packing
➡	9723	Replacement Tracheostomy Tube
	9724	Replace/Refit Vaginal Diaphragm
	9725	Replacement Oth Vaginal Pessary
	9726	Replace Vag/Vulvar Pack/Drain
	9729	Other Nonoperative Replacements
➡	9731	Removal Of Eye Prosthesis
➡	9732	Removal Of Nasal Packing
➡	9733	Removal Of Dental Wiring
	9734	Removal Of Dental Packing
	9735	Removal Of Dental Prosthesis
➡	9736	Removal Oth Ext Mandib Fix Dev
	9737	Removal Of Tracheostomy Tube
	9738	Removal Sutures From Head/Neck
➡	9739	Removal Oth Ther Dev Head/Neck
	9741	Remov Thoracot/Pleur Cav Drain

	Code #	Description
	9742	Removal Of Mediastinal Drain
	9743	Removal Of Sutures From Thorax
➡	9749	Removal Of Other Device Thorax
➡	9751	Removal Of Gastrostomy Tube
➡	9752	Removal Tube From Small Intest
	9753	Removal Tube Large Intes/Append
	9754	Removal Of Cholecystostomy Tube
	9755	Remov T-Tube/Bil Dct/Liver Tube
	9756	Removal Pancreatic Tube/Drain
➡	9759	Removal Other Dev Digest System
	9761	Remov Pyelost/Nephrostomy Tube
➡	9762	Remov Ureterost Tube/Uret Cath
	9763	Removal Of Cystostomy Tube
➡	9764	Removal Other Urinary Drain Dev
	9765	Removal Of Urethral Stent
	9769	Removal Oth Dev Urinary System
	9771	Removal Intraut Contracept Dev
	9772	Removal Of Intrauterine Pack
	9773	Removal Of Vaginal Diaphragm
	9774	Removal Other Vaginal Pessary
	9775	Removal Vaginal/Vulvar Packing
➡	9779	Removal Other Dev Genital Tract
	9781	Remov Retroperitoneal Drain Dev
	9782	Removal Peritoneal Drainage Dev
	9783	Removal Abdominal Wall Sutures
	9784	Removal Sutures From Trunk NEC
	9785	Removal Packing From Trunk NEC
	9786	Removal Other Dev From Abdomen
	9787	Removal Other Device From Trunk
➡	9788	Removal Ext Immobilizatn Device

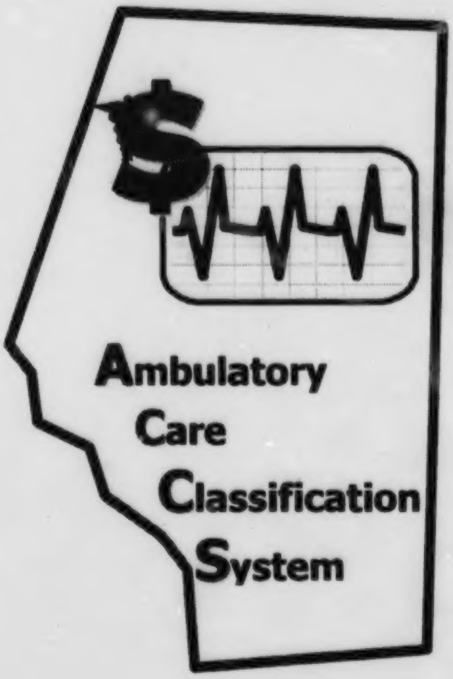
	Code #	Description
	9789	Removal Oth Therapeutic Device
	9801	Remov Intralum Fb Mouth No Inc
➡	9802	Remov Intralum Fb Esoph No Inc
➡	9803	Rem Intr Fb Stom/Sm Int No Inc
	9804	Remov Intr Fb Lrg Intest No Inc
➡	9805	Remov Intr Fb Rect/Anus No Inc
➡	9811	Remov Intralum Fb Ear No Incis
➡	9812	Remov Intralum Fb Nose No Incis
➡	9813	Remov Intralum Fb Phar No Incis
➡	9814	Remov Intralum Fb Larynx No Inc
➡	9815	Remov Intr Fb Trach/Bron No Inc
	9816	Remov Intralum Fb Uterus No Inc
	9817	Remov Intralum Fb Vagina No Inc
	9818	Remov Intralum Fb Stoma No Inc
➡	9819	Remov Intralum Fb Ureth No Inc
➡	9820	Removal Of Foreign Body Nos
➡	9821	Remov Superfic Fb Eye No Incis
➡	9822	Remov Oth Fb Head/Neck No Incis
	9823	Removal Fb From Vulva No Incis
	9824	Remov Fb Scrotum/Penis No Incis
	9825	Removal Fb Other Trunk No Incis
➡	9826	Removal Fb From Hand No Incis
➡	9827	Remov Fb Oth Upp Limb No Incis
➡	9828	Removal Fb From Foot No Incis
➡	9829	Remov Fb Oth Low Limb No Incis
➡	9851	Eswl Of Kidney/Ureter/Bladder
➡	9852	Eswl Of Gallbladder/Bile Duct
➡	9859	Eswl Of Other Sites
➡	9900	Periop Auto Trans Ofwhole Blood Or Blood
➡	9901	Exchange Transfusion

	Code #	Description
➡	9902	Autotransfusion Of Whole Blood
➡	9903	Other Transfusion Whole Blood
➡	9904	Transfusion Packed Cells
➡	9905	Transfusion Of Platelets
➡	9906	Transfusion Coagulation Factors
➡	9907	Transfusion Of Other Serum
➡	9908	Transfusion Of Blood Expander
➡	9909	Transfusion Of Other Substance
	9910	Injection Or Infusion Of Thrombolytic Agent
	9911	Injection Of Rh Immune Globulin
	9912	Immunization For Allergy
	9913	Immunization Autoimmune Disease
	9914	Injection Of Gamma Globulin
	9915	Parent Infus Conc Nutrit Subst
	9916	Injection Of Antidote
	9917	Injection Of Insulin
➡	9918	Injection/Infusion Electrolytes
	9919	Injection Of Anticoagulant
	9920	Injection Or Infusion Of Platelet Inhibitor
	9921	Injection Of Antibiotic
	9922	Injection Other Anti-Infective
	9923	Injection Of Steroid
	9924	Injection Of Other Hormone
➡	9925	Injectn/Infusn Cancer Chemo NEC
	9926	Injection Of Tranquilizer
	9927	Iontophoresis
	9928	Inject/Infus Brm/Antineoplastic
	9929	Injectn/Infusn Ther/Proph NEC
	9931	Vaccination Against Cholera
	9932	Vaccination Typhoid/Paratyphoid

	Code #	Description
	9933	Vaccination Tuberculosis
	9934	Vaccination Against Plague
	9935	Vaccination Against Tularemia
	9936	Administratn Diphtheria Toxoid
	9937	Vaccination Against Pertussis
	9938	Administration Tetanus Toxoid
	9939	Administration Dtp Combined
	9941	Admin Poliomyelitis Vaccine
	9942	Vaccination Against Smallpox
	9943	Vaccination Yellow Fever
	9944	Vaccination Against Rabies
	9945	Vaccination Against Measles
	9946	Vaccination Against Mumps
	9947	Vaccination Against Rubella
	9948	Measles-Mumps-Rubella Vaccine
	9951	Proph Vaccination Common Cold
	9952	Proph Vaccination Influenza
	9953	Proph Vaccin Viral Encephalitis
	9954	Proph Vaccin Arthropod Vir Dis
	9955	Proph Vaccination Other Disease
	9956	Admin Tetanus Antitoxin
	9957	Admin Botulism Antitoxin
	9958	Admin Other Antitoxins
	9959	Other Vaccination/Inoculation
	9960	Cardiopulm Resuscitation Nos
➡	9961	Atrial Cardioversion
➡	9962	Oth Electric Countershock Heart
	9963	Closed Chest Cardiac Massage
	9964	Carotid Sinus Stimulation
	9969	Other Conversion Cardiac Rhythm

	Code #	Description
➡	9971	Therapeutic Plasmapheresis
➡	9972	Therapeutic Leukopheresis
➡	9973	Therapeutic Erythrocytapheresis
➡	9974	Therapeutic Plateletpheresis
	9979	Other Therapeutic Apheresis
	9981	Hypothermia (Central)(Local)
	9982	Ultraviolet Light Therapy
	9983	Other Phototherapy
	9984	Isolation
	9985	Hyperthermia For Tx Of Cancer
➡	9986	Noninvas Place Bone Grow Stim
	9988	Therapeutic Photopheresis
	9991	Acupuncture For Anesthesia
	9992	Other Acupuncture
	9993	Rectal Massage (Levator Spasm)
	9994	Prostatic Massage
	9995	Stretching Of Foreskin
	9996	Collection Sperm Artific Insem
	9997	Fitting Of Denture
	9998	Extract Milk Lactating Breast
	9999	Other Miscellaneous Procedures

Alberta
HEALTH AND WELLNESS


Ambulatory
Care
Classification
System

5. MIS PRIMARY ACCOUNTS VALID IN ACCS

Effective April 2000

Account Number	Description
7112060	EMPLOYEE HEALTH Pertains to the provision of medical examinations as required, from time to time, for facility personnel, in accordance with Federal and Provincial Legislation and Health Care Facility Policy; and to the maintenance of the associated records. Includes all similar services procured on a purchased service basis.
713	AMBULATORY CARE SERVICES
71310	EMERGENCY Pertains to the unit where assessment, diagnostic and treatment services are provided for patients with conditions requiring immediate attention. Includes data for services provided for registered scheduled outpatients receiving care in emergency.
7131020	GENERAL EMERGENCY Pertains to the area where assessment, diagnostic and treatment services are provided for registered patients with general injuries and disorders which require prompt attention. Treatment should not be delayed beyond 24 hours.
7131040	INTERIM ASSESSMENT Pertains to the area where observation and treatment services are provided for registered patients who require short-term serialized assessment and management. May include services for patients who are waiting for an inpatient bed or awaiting transfer to another facility.
7131060	TRAUMA Pertains to the area where assessment, diagnostic and treatment services are provided for patients with severe, multiple system disorders as the result of injury, which are a potential threat to life or limb.
7131070	EMERGENCY PSYCHIATRIC SERVICES Pertains to the unit where services are provided, usually on a consultation basis, for registered patients, who are referred to the service by physicians, and who have acute psychiatric problems requiring assessment, treatment and disposition. Can pertain to a unit or team dedicated to the provision of this service.
7131080	EMERGENCY ADVICE CENTRE (AB SPECIFIC)
71320	POISON INFORMATION CENTRE Pertains to a unit where a telephone answering service is provided by professional personnel, primarily for information or advice on the treatment of known or suspected cases of poisoning. Services are usually for people of all age groups. Telephone services include assessment, advice for treatment and prevention, and referral to appropriate facilities for treatment and follow-up.

Account Number	Description
71330	**TELEHEALTH** **The Functional Centre pertaining to providing or receiving consultative services by way of video or teleconference in order to diagnose or treat patients/clients/residents.**
71340	DAY/NIGHT CARE Pertains to the units where services are provided for registered patients who attend for a number of hours of the day or the night.
7134005	GENERAL DAY/NIGHT CARE Pertains to the units where general, non-surgical services are provided for registered patients who attend for a number of hours of the day or the night.
7134010	MEDICAL (DAY/NIGHT CARE) Pertains to the units where medical, non-surgical services are provided for registered patients who attend for a number of hours of the day or the night.
7134020	SURGICAL/PROCEDURAL (OR/PARR EXCLUDED) Pertains to the units without self-contained operating room(s) and post-anaesthetic recover room(s) where scheduled surgical and diagnostic procedures are provided for registered patients who attend for a number of hours of the day or night. This unit provides pre and post-operative care only and utilizes operating room and recovery room facilities that serve inpatients.
7134025	SURGICAL/PROCEDURAL (OR/PARR INCLUDED) Pertains to the units with self-contained operating room(s) and post-anaesthetic recovery room(s) where scheduled surgical and diagnostic procedures are provided for registered patients who attend for a number of hours of the day or the night.
713402520	DAY/NIGHT CARE OPERATING ROOM(S) Pertains to the Operating Room where scheduled surgical and diagnostic procedures are provided only for registered patients who attend for a number of hours of the day or the night.
713402540	DAY/NIGHT CARE RECOVERY ROOM(S) Pertains to the Recovery Room where continuous observation, care and treatment is provided in the immediate post-operative and post-anaesthetic period, for registered patients who attend for a number of hours of the day or the night.
713402560	PRE AND POST OPERATIVE CARE Pertains to the unit where services are provided for surgical registered patients in the pre and post-operative stage and who attend for a number of hours of the day or the night.

Account Number	Description
7134030	PEDIATRIC DAY/NIGHT CARE (AB SPECIFIC) Pertains to the units where services are provided for registered paediatric patients who attend for a number of hours of the day or night.
7134035	CARDIAC Pertains to the units where services are provided for registered patients with cardiac disorders who attend for a number of hours of the day or of the night.
713403520	GENERAL CARDIAC Pertains to the unit where services are provided for registered patients who have general cardiac disorders and who attend for a number of hours of the day or of the night.
713403540	HEMODYNAMIC Pertains to the unit where services are provided for registered patients who require cardiac investigation and who attend for a number of hours of the day or the night.
7134050	DIABETES Pertains to the units where teaching and treatment services are provided for registered patients who are diabetic. Can pertain to a unit or to a team dedicated to the provision of this service.
7134055	ENDOSCOPY Pertains to the units where services are provided for registered patients who require endoscopic procedures and who attend for a number of hours of the day or the night.
7134060	GERIATRICS Pertains to the units where treatment and counselling services are provided for elderly registered patients, sick or well who attend for a number of hours of the day or the night.
713403520	GENERAL CARDIAC Pertains to the unit where services are provided for registered patients who have general cardiac disorders and who attend for a number of hours of the day or of the night.
713403540	HEMODYNAMIC Pertains to the unit where services are provided for registered patients who require cardiac investigation and who attend for a number of hours of the day or the night.
713406060	REHABILITATION Pertains to the unit where rehabilitation services are provided for elderly registered patients who attend for a number of hours of the day or the night. Can pertain to a unit or to a team dedicated to the provision of this service.

Account Number	Description
713406080	SOCIAL Pertains to the unit where treatment and counselling services are provided for elderly registered patients who require social support and who attend for a number of hours of the day or the night. Can pertain to a unit or to a team dedicated to the provision of this service.
7134065	METABOLIC Pertains to the units where services are provided for registered patients who are undergoing metabolic studies and who attend a number of hours of the day or the night.
7134070	ONCOLOGY Pertains to the units where services are provided for registered patients with neoplastic tumours/diseases who attend for a number of hours of the day or the night.
7134075	PALLIATIVE Pertains to the unit where treatment and support services are provided for terminally ill registered patients who attend for a number of hours of the day or the night. Can pertain to a specific unit, or to a team dedicated to the provision of these services.
7134080	PSYCHIATRY Pertains to the units where assessment, treatment and counselling services are provided for registered patients with psychiatric/psychological disorders who attend for a number of hours of the day or the night.
713408020	GENERAL PSYCHIATRY Pertains to the units where assessment, treatment and counselling services are provided for registered patients with general psychiatric/psychological disorders who attend for a number of hours of the day or the night.
713408040	ACUTE Pertains to the units where services are provided for registered patients with acute psychiatric disorders and who attend for a number of hours of the day or of the night.
713408060	CHRONIC Pertains to the units where services are provided for registered patients with chronic psychiatric disorders and who attend for a number of hours of the day or of the night.
713408080	ADDICTION Pertains to the units where treatment and counselling services are provided for registered patients who are dependent on chemical agents and who attend for a number of hours of the day or of the night.

Account Number	Description
7134085	RENAL DIALYSIS Pertains to the units where observation, treatment, and teaching services are provided for registered patients with kidney diseases who require dialysis.
713408510	HEMODIALYSIS Pertains to the unit where continuous observation, care and treatment services are provided for registered patients who require hemodialysis and who attend for a number of hours of the day or the night.
713408520	HOME DIALYSIS (TEACHING) COMBINED HEMO/PERITONEAL DIALYSIS Pertains to the unit where teaching and treatment services are provided for registered patients who are learning to carry out hemodialysis and/or peritoneal dialysis at home and who attend for a number of hours of the day or night.
713408530	HOME HEMODIALYSIS (TEACHING) Pertains to the unit where teaching and treatment services are provided for registered patients who are learning to carry out hemodialysis at home and who attend for a number of hours of the day or night.
713408540	HOME PERITONEAL DIALYSIS (TEACHING) Pertains to the unit where teaching and treatment services are provided for registered patients who are learning to carry out peritoneal dialysis at home and who attend for a number of hours of the day or night.
713408550	PERITONEAL DIALYSIS Pertains to the unit where continuous observation and treatment services are provided for registered patients who require peritoneal dialysis and who attend for a number of hours of the day or the night.
713408560	SELF CARE HEMODIALYSIS Pertains to the unit where services are provided for registered patients who require hemodialysis but who need only minimal or no nursing assistance and who attend for a number of hours of the day or the night.
7134090	REHABILITATION Pertains to the units where rehabilitative services are provided for patients. These services are intended for registered patients with a relatively stable disability who require specialized rehabilitation programs to restore or improve functional ability. Can pertain to a unit or a team dedicated to the provision of this service.
713409010	PRESCHOOL SERVICES (AB SPECIFIC) Pertains to units where habilitation and integration services are provided for registered patients usually under age six who require specialized intensive habilitation programs, programs including parent and caregiver training.
713409020	SCHOOL TREATMENT PROGRAM (AB SPECIFIC) Pertains to units or teams where habilitation services are provided for patients who require segregated educational placement.

Account Number	Description
71350	CLINICS Pertains to all clinics where diagnostic, consultative, treatment and teaching services are provided, primarily for registered outpatients. Excludes data for services provided for scheduled outpatients receiving care in the emergency department.
7135010	MEDICAL Pertains to all clinics where diagnostic, treatment, teaching and counselling services are provided for registered patients requiring medical, non-surgical attention.
713501010	GENERAL MEDICAL Pertains to the clinic were diagnostic, consultative, treatment, and teaching services are provided for registered patients with general medical disorders.
713501015	SEXUALLY TRANSMITTED DISEASES Pertains to the clinic were diagnostic, consultative, treatment and teaching services are provided for registered patients with sexually transmitted diseases. Services include assessment and follow-up care.
713501020	ALLERGY Pertains to the clinic where diagnostic, consultative, treatment and teaching services are provided for registered patients will all types of allergies. Reports of findings and recommended treatment are sent to referring physicians. Treatment may be continued on request.
713501025	ANTICOAGULANT Pertains to the clinic where diagnostic, consultative, treatment and teaching services are provided for registered patients requiring anticoagulant therapy. Services include assessment and follow-up care.
713501030	CHIROPODY Pertains to the clinic where diagnostic, consultative, treatment, and teaching services are provided for registered patients with disorders of the feet who require the services of a chiropodist. Services include assessment and follow-up care.
713501032	FOOT CARE CLINIC Pertains to services arising from the delivery of foot care services provided by a practitioner other than a chiropodist or podiatrist in clinics in the community.
713501035	COMMUNICABLE DISEASES Pertains to the clinic where follow-up services are provided for patients who have suffered from a severed communicable disease.
713501040	DERMATOLOGY Pertains to the clinic where diagnostic, consultative, treatment and teaching services are provided for registered patients with all types of skin disorders. Services include assessment and follow-up care.

Account Number	Description
713501045	ENTEROSTOMAL SERVICES Pertains to the clinic where consultative, treatment and teaching services are provided for registered patients with enterostomal devices. Services include assessment and follow-up care.
713501050	GASTROENTEROLOGY Pertains to the clinic where diagnostic, consultative, treatment and teaching services are provided for registered patients with gastrointestinal disorders. Services include simple endoscopy procedures.
713501055	HEMATOLOGY Pertains to the clinic where diagnostic, consultative, treatment and teaching services are provided for registered patients with blood disorders. Services include assessment and follow-up care.
713501060	HYPERTENSION Pertains to the clinic where diagnostic, consultative, treatment and teaching services are provided for registered patients with hypertensive disorders. Services include assessment and follow-up care.
713501065	IMMUNOLOGY Pertains to the clinic where diagnostic, consultative, treatment, teaching and follow-up services are provided for registered patients with immune suppressed disorders.
713501070	PREADMISSION CLINICS, MEDICAL Pertains to the clinic where assessment and investigative services are provided for registered patients prior to a medical admission.
713501075	PAIN MANAGEMENT Pertains to the clinic where consultative, treatment, and teaching services are provided for registered patients with uncontrolled pain. Services include assessment and follow-up care.
713501080	PODIATRY Pertains to the clinic where diagnostic, consultative, treatment and teaching services are provided for registered patients with disorders of the feet who require treatment by a podiatrist. Services include assessment and follow-up.
713501085	RESPIROLOGY Pertains to the clinic where diagnostic, consultative, treatment and teaching services are provided for registered patients with disorders of the respiratory system and for patients with chronic pulmonary disease, cystic fibrosis and asthma. Services may include assessment and follow-up care.
713501087	CYSTIC FIBROSIS Pertains to the clinic where diagnostic, consultative, treatment, and teaching services are provided for registered patients with cystic fibrosis. Services include assessment and follow-up care.

Account Number	Description
713501090	TRAVEL AND INOCULATION Pertains to the clinic where services are provided for registered patients who require inoculation against specific diseases prior to travelling abroad.
713501095	NEPHROLOGY Pertains to all clinics where diagnostic, consultative, treatment and teaching services are provided for registered patients with disorders of the kidney.
7135015	SURGICAL Pertains to all clinics where diagnostic, consultative, treatment and teaching services are provided for registered patients requiring surgical attention.
713501510	GENERAL SURGERY Pertains to the clinic where diagnostic, consultative, treatment and teaching services are provided for registered patients requiring general surgical services. Services include assessment and follow-up.
713501520	DENTAL Pertains to the clinic where diagnostic, consultative, treatment and teaching services are provided for registered patients with dental disorders which required surgical attention. Services include assessment and follow-up care.
713501525	EAR, NOSE AND THROAT Pertains to the clinic where diagnostic, consultative, treatment and teaching services are provided for registered patients with disorders of the ear, nose and throat. Services include assessment and follow-up care.
713501530	MINOR SURGERY Pertains to the clinic where all types of minor surgical procedures are performed on registered patients.
713501535	ORAL/FACIAL SURGERY Pertains to the clinic where diagnostic, consultative, treatment and teaching services are provided for patients with disorders of the face and mouth with require surgical attention. Services include assessment and follow-up care.
713501540	ORTHODONTIC Pertains to the clinic where consultative, treatment and teaching services are provided for registered patients with irregularities in the normal positioning of teeth, and/or improper bite contact between upper and lower jaw which require surgical attention. Services include assessment and follow-up care.

Account Number	Description
713501545	PREADMISSION CLINICS, SURGICAL Pertains to the clinic where assessment and investigative services are provided for registered patients prior to a surgical admission.
713501550	THORACIC CLINICS Pertains to the clinic where diagnostic, consultative, treatment and teaching services are provided for patients with disorders of the thorax which require surgical attention. Services include assessment and follow-up care.
713501555	TRANSPLANT CLINICS Pertains to the clinic where follow-up services are provided for registered patients who have undergone transplant surgery.
713501560	UROLOGY CLINICS Pertains to the clinic where diagnostic, consultative, treatment and teaching services are provided for registered patients with disorders of the urinary tract and/or of the male reproductive system which require surgical attention. Services include assessment and follow-up care.
713501570	BONE MARROW TRANSPLANT (AB SPECIFIC) Pertains to the clinic where diagnostic, consultative, treatment and teaching services are provided for registered patients involving bone marrow transplants. Includes assessment and follow-up care.
7135017	COMBINED MEDICAL/SURGICAL Pertains to the clinics where diagnostic, consultative, treatment and teaching services are provided to registered patients requiring medical and/or surgical attention. This functional centre is to be used where the volume of various medical or surgical services is so limited that separate functional centers cannot be established.
7135020	CARDIAC Pertains to all clinics where diagnostic, consultative, treatment and teaching services are provided for registered patients requiring medical or surgical attention for cardiac and major blood vessel disorders.
713502010	GENERAL CARDIOLOGY Pertains to the clinic where medical, non-surgical diagnostic, consultative, treatment and teaching services are provided for registered patients with cardiac disorders. Services include assessment and follow-up care.
713502020	CARDIOVASCULAR SURGERY Pertains to the clinic where surgical diagnostic, consultative, treatment and teaching services are provided for registered patients with disorders of the heart and major blood vessels. Services include assessment and follow-up care.
713502030	CONGENITAL Pertains to the clinic where diagnostic, consultative, treatment and teaching services are provided for registered patients with congenital cardiac disorders. Services include assessment and follow-up care.

Account Number	Description
713502040	PACEMAKER Pertains to the clinic where follow-up consultative, treatment and teaching services are provided for registered patients with pacemakers.
713502060	REHABILITATION Pertains to the clinic where services are provided for registered patients with coronary artery disease who require education and advice on exercise to increase levels of fitness and to identify safe exertion limits for general lifestyle or occupational activities.
713502070	VALVE Pertains to the clinic where follow-up consultative, treatment and teaching services are provided for registered patients who have been surgically treated for valve disorders.
7135025	FAMILY PRACTICE Pertains to all clinics where family practice services are provided for registered patients.
7135030	GERIATRIC (AB SPECIFIC) Pertains to the treatment and counselling services provided for geriatric patients.
713503010	GERIATRIC GENERAL (AB SPECIFIC) Pertains to the general health services for geriatric patients.
713503020	GERIATRIC ASSESSMENT (AB SPECIFIC) Pertains to specialized assessment services to geriatric patients.
7135035	GYNECOLOGY Pertains to all clinics where diagnostic, consultative, treatment and teaching services are provided for registered patients who have disorders of the female reproductive system and who require medical and/or surgical attention.
713503510	GENERAL GYNECOLOGY Pertains to the clinic where diagnostic, consultative, treatment, and teaching services are provided for registered patients with general disorders of the female reproductive system. Services include assessment and follow-up care.
713503530	COLPOSCOPY/LASER SURGERY/CRYOSURGERY Pertains to the clinic where diagnostic, consultative, treatment and teaching services are provided for registered female patients requiring colposcopy. Services include assessment and follow-up care.
713503540	FAMILY PLANNING Pertains to the clinic where family planning consultative services are provided for registered female patients, and their partners.

Account Number	Description
713503550	INFERTILITY Pertains to the clinic where diagnostic, consultative, treatment and teaching services are provided for both male and female registered patients who required investigation for infertility.
713503560	THERAPEUTIC ABORTION Pertains to the clinic where services are provided for registered patients who require assessment and counselling for therapeutic abortion, and who require follow-up services.
713503570	WELL WOMEN Pertains to the clinic where screening and teaching services are provided for registered well women.
7135040	METABOLIC Pertains to all clinics where diagnostic, consultative, treatment and teaching services are provided for registered patients with metabolic disorders.
713504010	GENERAL METABOLIC Pertains to all clinics where diagnostic, consultative, treatment and teaching services are provided for registered patients with general metabolic disorders.
713504020	DIABETES Pertains to the clinic where diagnostic, consultative, treatment and teaching services are provided for registered patients who are diabetic. Services include assessment and follow-up care.
7135043	ENDOCRINOLOGY Pertains to the clinic where diagnostic, consultative, treatment and teaching services are provided for registered patients with endocrine disorders. Services include assessment and follow-up care.
7135045	NEUROLOGY Pertains to all clinics where diagnostic, consultative, treatment and teaching services are provided for registered patients who require medical and/or surgical attention for disorders of the nervous system.
713504510	GENERAL NEUROLOGY Pertains to the clinic where medical, non-surgical diagnostic, consultative, treatment and teaching services are provided for registered patients with disorders of the nervous system. Services include assessment and follow-up care.
713504520	GENERAL NEUROSURGERY Pertains to the clinic where surgical diagnostic, consultative, treatment and teaching services are provided for registered patients with disorders of the nervous system. Services include assessment and follow-up care.

Account Number	Description
713504530	CONVULSIVE DISORDERS Pertains to the clinic where diagnostic, consultative, treatment and teaching services are provided for registered patients with convulsive disorders. Services include assessment and follow-up care.
713504540	MIGRAINE Pertains to the clinic where diagnostic, consultative, treatment and teaching services are provided for registered patients suffering from severe migraine. Services include assessment and follow-up.
713504550	NEUROMUSCULAR DISORDERS Pertains to the clinic where consultative, treatment and teaching services are provided for registered patients with neuromuscular disorders. Services include assessment and follow-up care.
713504560	VERTIGO Pertains to the clinic where diagnostic, consultative, treatment and teaching services are provided for registered patients who suffer from debilitating dizziness. Services include assessment and follow-up care.
713504580	MULTIPLE SCLEROSIS Pertains to the clinic where consultative, treatment, and teaching services are provided for registered patients with multiple sclerosis. Services include assessment and follow-up care.
7135050	OBSTETRICS Pertains to all clinics where diagnostic, consultative, treatment and teaching services are provided for registered patients who require ante- and postpartum care.
713505020	GENERAL ANTEPARTUM Pertains to the clinic where consultative and treatment services are provided for registered patients in the antepartum stage.
713505040	ANTEPARTUM GENETIC Pertains to the clinic where consultative, investigative , and counselling services are provided for registered women in the antepartum stage who have a past or family history of genetic disorders, and/or mature women who have become pregnant later in life. Services include assessment and follow-up care.
713505060	HIGH RISK ANTE/POSTPARTUM Pertains to the clinic where consultative, treatment and teaching services are provided for registered patients with high risk scores, or for those who have shown indications of problems that may be encountered by either the mother or baby during pregnancy, delivery and early postnatal period. Includes ante- and postpartum care, and can include prenatal non-stress and/or stress testing.
713505080	POSTPARTUM Pertains to the clinic where consultative, treatment and teaching services are provided for registered patients in the postpartum stage.

Account Number	Description
713505085	PERINATAL EDUCATION (AB SPECIFIC) Pertains to the clinic which provides perinatal education to registered patients.
7135055	ONCOLOGY Pertains to all clinics where follow-up, consultative, treatment and teaching services are provided for registered patients with neoplastic tumours/diseases.
713505520	GENERAL ONCOLOGY Pertains to the clinic where follow-up, consultative, treatment and teaching services are provided for registered patients with neoplastic tumours in any part of the body or body system.
713505530	LIP, ORAL CAVITY AND PHARYNX Pertains to all clinics where follow-up, consultative, treatment and teaching services are provided for registered patients with neoplastic tumours of the lip, oral cavity and pharynx.
713505540	DIGESTIVE ORGANS AND PERITONEUM Pertains to all clinics where follow-up, consultative, treatment and teaching services are provided for registered patients with neoplastic tumours of the digestive organs and peritoneum.
713505550	RESPIRATORY AND INTRATHORACIC ORGANS Pertains to all clinics where follow-up, consultative, treatment and teaching services are provided for registered patients with neoplastic tumours of the respiratory and intrathoracic organs.
713505560	BONE, CONNECTIVE TISSUE, SKIN AND BLOOD Pertains to all clinics where follow-up, consultative, treatment and teaching services are provided for registered patients with neoplastic tumours of the bone, connective tissue, skin and blood.
713505570	GENITO-URINARY ORGANS Pertains to all clinics where follow-up, consultative, treatment and teaching services are provided for registered patients with neoplastic tumours of the genito-urinary organs.
713505580	LYMPHATIC AND HEMATOPOIETIC TISSUE Pertains to all clinics where follow-up, consultative, treatment and teaching services are provided for registered patients with neoplastic tumours of the lymphatic and hematopoietic tissue.
713505590	EARLY DETECTION OF BREAST CANCER Pertains to the clinic where diagnostic, consultative, treatment and teaching services are provided for registered patients who require early detection of breast cancer. Includes screen test program.
7135060	OPHTHALMOLOGY Pertains to all clinics where diagnostic, consultative, treatment and teaching services are provided for registered patients requiring medical and/or surgical attention for disorders of the eye.

Account Number	Description
713506010	GENERAL OPHTHALMOLOGY Pertains to the clinics where diagnostic, consultative, treatment and teaching services are provided for registered patients with disorders of the eye. Services include assessment and follow-up care.
713506020	CONTACT LENS Pertains to the clinic where consultative, treatment and teaching services are provided for registered patients who require therapeutic fitting of a lens for vision and for cosmetic purposes. Services include assessment and follow-up care.
713506030	CRYOSURGERY Pertains to the clinic where freezing treatment is provided for registered patients with retinal disorders. Services include assessment and follow-up care.
713506040	FLUORESCEIN Pertains to the clinic where fluorescein studies of the retina are conducted on registered patients for diagnostic purposes.
713506050	GLAUCOMA Pertains to the clinic where diagnostic, consultative, treatment and teaching services are provided for registered patients who have glaucoma. Services include assessment and follow-up care.
713506060	LASER Pertains to the clinic where laser treatment is provided for registered patients with retinal disorders and glaucoma. Services include assessment and follow-up care.
713506070	ORTHOPTIC Pertains to the clinic where diagnostic, consultative, treatment and teaching services are provided for registered patients with disorders in the support structure of the eye. Services include assessment and follow-up care.
713506080	TONOGRAPHY Pertains to the clinic where consultative and treatment services are provided for registered patients who require measurement of intraocular pressure. Services include assessment and follow-up care.
713506090	ULTRASOUND Pertains to the clinic where assessment, consultative, and follow-up services are provided for registered patients with eye disorders.
7135065	ORTHOPEDIC Pertains to all clinics where diagnostic, consultative, treatment and teaching services are provided for registered patients who require medical and/or surgical attention for disorders of the skeletal system.

Account Number	Description
713506510	GENERAL ORTHOPEDIC Pertains to the clinic where diagnostic, consultative, treatment and teaching services are provided for registered patients with general disorders of the skeletal system. Services include assessment and follow-up care.
713506520	FRACTURE Pertains to the clinic where consultative, treatment, teaching and follow-up services are provided for registered patients with fractures.
713506530	ORTHOTICS Pertains to the clinic where orthotic appliances including splints, shoes, braces, etc., are made and fitted for registered patients. Services include assessment and follow-up care.
713506540	PLASTER ROOM Pertains to the clinic where casts are applied and/or removed from registered patients.
713506550	SPORTS MEDICINE Pertains to the clinic where diagnostic, consultative, treatment and teaching services are provided for registered patients with sports-related injuries. Services include assessment and follow-up care.
7135070	PEDIATRIC Pertains to all clinics where diagnostic, consultative, treatment and teaching services are provided for registered paediatric patients requiring medical and/or surgical attention.
713507010	GENERAL PEDIATRIC Pertains to the clinic where diagnostic, consultative, treatment and teaching services are provided for registered general paediatric patients. Services include assessment and follow-up care.
713507020	WELL BABY Pertains to the clinic where follow-up, consultative, and treatment services are provided for registered well babies.
713507030	CHILD PROTECTION Pertains to the clinic where consultative, counselling, and treatment services are provided for registered children who have been physically and/or mentally abused. Services include assessment and follow-up care.
713507035	SPINA BIFIDA (AB SPECIFIC)
713507045	GENETIC Pertains to the clinic where diagnostic and counselling services are provided for registered patients of any age who are concerned about hereditary diseases.

Account Number	Description
713507050	GROWTH AND DEVELOPMENT Pertains to the clinic where screening, diagnostic and treatment services are provided for registered paediatric patients with possible growth and development disorders. Services include assessment and long-term follow-up care.
713507055	SCOLIOSIS (AB SPECIFIC) Pertains to the clinic where diagnostic, consultative, treatment and teaching services are provided for registered patients with scoliosis.
713507060	PEDIATRIC PROSTHETICS (AB SPECIFIC) Pertains to the clinic where diagnostic, consultative, treatment and teaching services are provided for registered patients who require pediatric prosthetics.
713507062	PEDIATRIC SEATING (AB SPECIFIC) Pertains to the clinic where diagnostic, consultative, treatment and teaching services are provided for registered patients who require pediatric seating treatment.
713507065	NEONATOLOGY Pertains to the clinic where follow-up services are provided for registered infant patients who have received services in a neonatal intensive care unit after birth, and/or for infants who were at risk during delivery.
713507075	PEDIATRIC CONNECTIVE TISSUE (AB SPECIFIC) Pertains to the clinic where diagnostic, consultative, treatment and teaching services are provided for registered patients with pediatric connective tissue disorders.
713507085	JUVENILE CONVULSIVE DISORDER (AB SPECIFIC) Pertains to the clinic where diagnostic, consultative, treatment and teaching services are provided for registered patients with juvenile convulsive disorders.
7135075	PLASTIC Pertains to all clinics where diagnostic, consultative, treatment and follow-up services are provided for registered patients who require the services of a plastic surgeon.
713507510	GENERAL PLASTIC Pertains to the clinic where diagnostic, consultative and treatment services are provided for patients with injuries and disorders of any part of the body and who require the services of a plastic surgeon. Services include assessment and follow-up care.
713507520	BURN Pertains to the clinic where assessment, consultative, treatment and follow-up services are provided for patients with burns to the body.

Account Number	Description
713507530	COSMETIC Pertains to the clinic where assessment, consultative, treatment and follow-up services are provide for registered patients who require cosmetic surgery.
713507540	HAND Pertains to the clinic where diagnostic, consultative, and treatment services are provided for registered patients with injuries of the hand. Services include assessment and follow-up care.
713507550	RECONSTRUCTIVE Pertains to the clinic where assessment, consultative, treatment and follow-up services are provided for registered patients who require reconstructive surgery.
7135080	PSYCHIATRY Pertains to all clinics where diagnostic, consultative, treatment and teaching services are provided for registered patients with psychiatric/psychological disorders.
713508010	GENERAL PSYCHIATRY Pertains to the clinic where diagnostic, consultative, treatment and teaching services are provided for registered patients with general psychiatric disorders. Services include assessment and follow-up care.
713508020	ASSESSMENT Pertains to the clinic where assessment services are provided for registered patients with psychiatric disorders for the purpose of referring the patient to the appropriate care setting.
713508030	FORENSIC Pertains to the clinic where diagnostic, consultative, treatment and counselling services are provided for registered patients with behavioural, emotional and mental disorders who have been refereed by the criminal justice department. Services include assessment and follow-up care.
713508040	ADDICTION Pertains to all clinics where assessment, treatment, counselling and follow-up services are provided for registered patients who are dependent on chemical agents.
713508060	SPOUSAL BATTERING Pertains to the clinic where consultative, treatment and counselling services are provided for registered patients, male and female, who have been physically and/or mentally abused by their spouse. Services include assessment and follow-up care.
713508065	STRESS MANAGEMENT Pertains to the clinic where consultative, treatment and counselling services are provided for patients suffering from severe emotional stress. Services include assessment and follow-up care.

Account Number	Description
713508070	EATING DISORDERS Pertains to all clinics where consultative, treatment and counselling services are provided for registered patients with eating disorders. Services include assessment and follow-up care.
7135085	REHABILITATION Pertains to all clinics where assessment, consultative, treatment and teaching services are provided for registered patients requiring specialized rehabilitation programs to restore or to improve functional ability.
713508510	GENERAL REHABILITATION Pertains to the clinic where general rehabilitation services are provided for registered patients. Services include assessment and follow-up care.
713508520	AMPUTEE Pertains to the clinic where assessment, teaching, counselling and follow-up services are provided for registered patients with amputations. Patients may also require management of underlying disease, stump and prostheses management.
713508530	BACK INJURY (INCLUDING EDUCATION) Pertains to the clinic where services are provided for registered patients with chronic back pain. Services include teaching lifestyle adaptations, injury prevention and pain management, assessment and follow-up care.
713508535	HEAD INJURY Pertains to the clinic where assessment, treatment, physiological and psychological care, and follow-up services are provided for registered patients following head injuries.
713508540	BRAIN INJURY (AB SPECIFIC) Pertains to the clinic where diagnostic, consultative, treatment and teaching services are provided for registered patients with brain injuries.
713508545	ORTHOPEDIC Pertains to the clinic where treatment, teaching and counselling services are provided for patients with impairments of the skeletal system. Services include assessment and follow-up care.
713508560	SPINAL CORD Pertains to the clinic where assessment, psychological and physiological care, treatment, teaching, counselling, and follow-up services are provided for registered patients with spinal disorders.

Account Number	Description
713508565	STROKE Pertains to the clinic where assessment, diagnostic, treatment and follow-up services are provided for registered patients who have suffered a stroke and require physiological and psychological care and treatment, teaching and counselling.
713508570	URODYNAMIC Pertains to the clinic where diagnostic, consultative, treatment, assessment and follow-up services are provided for registered patients with bladder dystonia.
7135095	RHEUMATOLOGY Pertains to all clinics where diagnostic, consultative, treatment, and teaching services are provided for registered patients with collagen and joint diseases.
713509520	GENERAL RHEUMATOLOGY Pertains to the clinic where diagnostic, consultative, treatment and teaching services are provided for registered patients with general collagen and joint diseases. Services include assessment and follow-up care.
713509540	GOLD TREATMENT Pertains to the clinic where consultative, treatment, and teaching services are provided for registered patients who require gold treatment. Services include assessment and follow-up care.
713509560	LUPUS Pertains to the clinic where consultative, treatment and teaching services are provided for registered patients with systemic lupus erythematosus. Services include assessment and follow-up services.
713509580	SCLERODERMA Pertains to the clinic where consultative, treatment and teaching services are provided for registered patients with scleroderma. Services include assessment and follow-up care.
71355	PRIVATE CLINICS Pertains to all clinics where diagnostic, consultative, treatment, and teaching services are provided for patients who seek treatment from their physician, in private offices in the clinic. Includes free standing private clinics (ie. laser eye surgery, abortion and dental surgery). Private clinics usually contract service volumes with the RHA and are reimbursed by the RHA on a per patient basis. Does not include contracted Community CRP services (see 71495).
7135510	MEDICAL SPECIALTY PRIVATE CLINIC (AB SPECIFIC) Medical private clinics.

Account Number	Description
7135515	SURGICAL SPECIALTY CLINIC (AB SPECIFIC) Surgical private clinics including abortion clinics.
713551510	GENERAL SPECIALTY CLINIC (AB SPECIFIC) General surgical private clinics.
713551520	DENTAL SPECIALTY CLINIC (AB SPECIFIC) Dental surgical private clinics.
713551560	THERAPEUTIC ABORTION SPECIALTY CLINIC (AB SPECIFIC) Therapeutic abortion private clinics.
7135520	CARDIAC SPECIALTY CLINIC (AB SPECIFIC) Cardiac private clinics.
7135560	OPHTHALMOLOGY SPECIALTY PRIVATE CLINIC (AB SPECIFIC) Ophthalmology private clinics including laser eye surgery.
7135565	ORTHOPEDIC SPECIALTY PRIVATE CLINIC (AB SPECIFIC) Orthopedic private clinics.
7135575	PLASTIC SPECIALTY PRIVATE CLINIC (AB SPECIFIC) Plastic private clinics.
71395	PSYCHIATRY AMBULATORY CARE SERVICES (AB SPECIFIC) The Functional Centers in which are recorded budget and actual data for the direct expenses, statistics and revenues (if any), pertaining to the service where diagnostic, consultative, assessment, treatment, counselling, teaching and/or follow-up services are provided to registered outpatients with psychiatric/behavioural disorders.
7139510	GENERAL PSYCHIATRY (AB SPECIFIC) Pertains to the area where services are provided to registered outpatients with relatively stable psychiatric/behavioural disorders. (This Functional Centre may include outpatients with a variety of psychiatric/behavioural disorders).
713951010	GENERAL PSYCHIATRIC TREATMENT (AB SPECIFIC) Pertains to the services to registered outpatients with relatively stable psychiatric/behavioural disorders. (This functional centre may include inpatients with a variety of psychiatric/behavioural disorders).
713951020	GENERAL PSYCHIATRY INDIVIDUAL TREATMENT (AB SPECIFIC) Pertains to services provided on an individual basis to registered outpatients with psychiatric/behavioural disorders.
713951030	GENERAL PSYCHIATRY GROUP TREATMENT (AB SPECIFIC) Pertains to services provided in a group setting to registered outpatients with psychiatric/behavioural disorders.
7139520	PSYCHIATRIC REHABILITATION (AB SPECIFIC) Pertains to the areas where services are provided to registered outpatients with relatively stable psychiatric/behavioural disorders who require specialized rehabilitation services to restore, or to reach, their optimum level of functioning.

Account Number	Description
713952010	GENERAL PSYCHIATRIC REHABILITATION (AB SPECIFIC) Pertains to the area where services are provided to registered outpatients with relatively stable psychiatric/behavioural disorders who require specialized rehabilitation services to reach or restore their optimum level of functioning.
713952020	RESPITE (AB SPECIFIC) Pertains to the area where services are provided to registered outpatients with a chronic psychiatric/behavioural disorder who are usually care for at home, but require temporary services while the primary care giver(s) are unable to provide care for a specific period of time.
713952030	LONG TERM REHABILITATION (AB SPECIFIC) Pertains to the area where services are provided to registered outpatients whose capacities are chronically impaired and who require psychiatric rehabilitation services for an extended period of time.
7139530	ADDICTION/SUBSTANCE ABUSE (AB SPECIFIC) Pertains to the area where services are provided to registered outpatients with addiction/substance abuse disorders.
713953010	ALCOHOL ADDICTION/ABUSE (AB SPECIFIC) Pertains to the clinic where diagnostic, consultative, treatment and teaching services are provided for registered patients with alcohol addiction/abuse disorders.
713953020	DRUG ADDICTION/ABUSE (AB SPECIFIC) Pertains to the clinic where diagnostic, consultative, treatment and teaching services are provided for registered patients with drug addiction/abuse disorders.
7139540	FORENSIC (AB SPECIFIC) Pertains to the area where services are provided to registered outpatients with a psychiatric/behavioural disorder who have been referred by the criminal justice system.
713954010	FORENSIC REHABILITATION (AB SPECIFIC) Pertains to the area where services are provided to registered forensic outpatients with a relatively stable disability who require specialized rehabilitation programs to reach or to restore their optimum level of functioning.
713954020	COURT ASSESSMENT/TREATMENT (AB SPECIFIC) Pertains to the area where assessment or treatment services are provided to registered outpatients with psychiatric/behavioural disorders who have been referred by the criminal justice system.

Account Number	Description
713954030	SEX OFFENDERS (AB SPECIFIC) Pertains to the area where services are provided to registered outpatients who have been convicted of sex offences.
713954040	FAMILY VIOLENCE (AB SPECIFIC) Pertains to the area where services are provided to registered forensic outpatients with psychiatric/behavioural disorders, who require services as a result of family violence.
7139550	GERO-PSYCHIATRY (AB SPECIFIC) Pertains to the area where services are provided to registered geriatric outpatients with psychiatric/behavioural disorders. May include physical care needs, but the primary reasons for treatment will be psychiatric in nature.
713955010	GENERAL GERO PSYCHIATRY (AB SPECIFIC) Pertains to the area where services are provided to registered geriatric outpatients with psychiatric/behavioural disorders.
713955020	GERO PSYCHIATRY REHABILITATION (AB SPECIFIC) Pertains to the area where services are provided to registered outpatients with a relatively stable disability who require specialized rehabilitation program to restore or to reach their optimum level of functioning.
713955030	RESPITE (AB SPECIFIC) Pertains to the are where services are provided to registered geriatric outpatients with a chronic psychiatric/behavioural disorder, who are usually cared for at home, but require temporary services while the primary caregiver(s) are unable to provide care for a specific period of time.
7139560	SPECIAL CARE (AB SPECIFIC) Pertains to the area where formalized single focus services are provided to registered outpatients with psychiatric/behavioural disorders.
713956010	MAJOR AFFECTIVE DISORDERS (AB SPECIFIC) Pertains to the area where services are provided to registered outpatients with major affective disorders.
713956020	ANXIETY DISORDERS (AB SPECIFIC) Pertains to the area where formalized services are provided to registered outpatients with anxiety disorders.
713956025	EATING DISORDERS (AB SPECIFIC) Pertains to the area where formalized services are provided to registered outpatients with eating disorders.

Account Number	Description
713956030	PERSONALITY DISORDERS (AB SPECIFIC) Pertains to the area where formalized services are provided to registered outpatients with personality disorders.
713956035	SCHIZOPHRENIC DISORDERS (AB SPECIFIC) Pertains to the area where formalized services are provided to registered outpatients with schizophrenic disorders.
713956040	DEVELOPMENTALLY DELAYED (AB SPECIFIC) Pertains to the area where formalized services are provided to registered outpatients who are developmentally delayed.
713956050	MEDICATION ADMINISTRATION (AB SPECIFIC) Pertains to the area were formalized services are provided to registered outpatients who require administration and/or monitoring of medication.
713956060	FAMILY VIOLENCE (AB SPECIFIC) Pertains to the area where formalized services related to family violence are provided to registered outpatients with psychiatric/behavioural disorders. Excludes patients referred by the criminal justice system.
713956070	FAMILY THERAPY (AB SPECIFIC) Pertains to the area where formalized services related to family dysfunction are provided to registered outpatients with psychiatric/behavioural disorders. May include marital therapy. Excludes family violence.
713956080	WOMEN'S MENTAL HEALTH SERVICES (AB SPECIFIC) Pertains to the area where formalized services related to women's health issues are provided to registered outpatients.
713956085	NEUROPHYSIOLOGICAL DISORDERS (AB SPECIFIC) Pertains to the area where formalized services are provided to registered outpatients with neurophysiological disorders.
7139570	BRAIN INJURY REHABILITATION (AB SPECIFIC) Pertains to the area where services are provided to registered outpatients with psychiatric/behavioural disorders resulting from injury to the brain and who may or may not have physical dysfunctions.
77139580	COMMUNITY PILOT PROJECT (AB SPECIFIC)
714	DIAGNOSTIC/THERAPEUTIC SERVICES: IDENTIFIES CLINICS IN SOME HOSPITALS.
71415	DIAGNOSTIC IMAGING Pertains to the production of visual records of body tissues and functions, and the interpretation of the records to assist in the clinical investigation and patient management.

Account Number	Description
7141510	DIAGNOSTIC IMAGING – GENERAL Pertains to the provision of management and operational support to the entire diagnostic imaging service. Since this Functional Center provides management and operational support service to other functional centres within the diagnostic imaging functional centre, its costs must be distributed as indirect costs to those user functional centres. A suggested distribution base is the specific percentage of total units of service generated by the user functional centres.
7141515	SPECIAL PROCEDURES (AB SPECIFIC)
714151520	SPECIAL PROCEDURES DIAGNOSTIC (AB SPECIFIC)
714151530	SPECIAL PROCEDURES THERAPY (AB SPECIFIC) (INCLUDES INTERVENTIONAL EXAMINATIONS)
7141520	DIAGNOSTIC RADIOLOGY Pertains to the use of radiant energy from X-ray equipment for diagnostic purposes. (Includes radiography, fluoroscopy, tomography and mammography).
7141525	COMPUTED TOMOGRAPHY Pertains to the use of radiant energy from computed tomography equipment for diagnostic purposes. Computed Tomography is a modality which reconstructs images of tissues and organs by means of a computer, which produces either visual displays or a TV monitor or graphic presentations of the subject being studied.
7141530	DIAGNOSTIC ULTRASOUND Pertains to the production of a visual record of body tissues by means of high frequency sound-waves, and to provide an interpretation of the record to assist in the clinical investigation of the patient.
714153010	ULTRASOUND GENERAL Includes obstetrical, gynecological, abdominal and neurological ultrasound
714153060	OPTHALMOLOGICAL ULTRASOUND
714153070	ULTRASOUND CARDIAC (AB SPECIFIC)
7141540	NUCLEAR MEDICINE (IN VIVO) Pertains to the utilization of the nuclear properties of radioactive and stable nucleides to make diagnostic evaluations of the anatomic and/or diagnostic evaluations of the anatomic and/or physiologic conditions of the body and to provide therapy with unsealed radioactive sources.
714154010	NUCLEAR MEDICINE GENERAL (AB SPECIFIC)
714154020	NUCLEAR MEDICINE CARDIAC (AB SPECIFIC)

Account Number	Description
714154030	NUCLEAR MEDICINE THERAPY (AB SPECIFIC) (Includes interventional examinations)
7141550	CARDIAC CATH LABORATORY Pertains to the provision of invasive, hemodynamic, electro-physiologic, biomedical and angiographic study of the heart, through the use of such procedures as cardiac catheterization, HIS bundle studies, pulmonary angiography, myocardial biopsies, coronary sinus catheterization, electrophysiological studies (FICK) and transluminal angioplasty.
714155020	CARDIAC CATHETERIZATION DIAGNOSTIC (AB SPECIFIC)
714155030	CARDIAC CATHETERIZATION THERAPY (AB SPECIFIC) Includes interventional examinations.
7141580	OTHER DIAGNOSTICS
7141570	MAGNETIC RESONANCE IMAGING Pertains to the production of a visual record of body tissues and organs by use of radiant energy from magnetic resonance equipment; and to the provision of interpretation of the record to assist in the clinical investigation of the patient.
71420	RADIATION ONCOLOGY Pertains to the use of radiant energy from x-ray equipment and radioactive elements for their therapeutic purposes.
71425	ELECTRODIAGNOSIS Pertains to the measurement and recording of electrical impulses of the brain for the evaluation of the brain, and associated physiologic functions. Excludes data pertaining to electrocardiography (ECG) services.
7142510	ELECTROENCEPHALOGRAPHY (EEG) Pertains to the measurement and recording of electrical impulses of the brain for the evaluation of brain function.
7142520	ELECTROMYOGRAPHY (EMG) Pertains to the recording of electrical potential variations in muscles on an electromyograph, in order to facilitate the diagnosis of muscular and nervous disorders.
7142530	EVOKED POTENTIAL Pertains to the recording of responses of the brain to a variety of stimuli (auditory, visual, somata-sensory). In neurology, in particular, it is essentially a diagnostic tool used in the evaluation of brainstem function as well as the evaluation of the functional integrity of sensory projection pathways in the central nervous system.

Account Number	Description
7142540	SLEEP STUDIES Pertains to the overnight recording of EEG with constant monitoring of EOG, EMGs, EKGs, multiple transducers for recording respiration, PO2 monitoring, etc. Sleep studies are a diagnostic tool used in the evaluation of patients suspected of movement disorders, sleep apnea, hypersomnias, organic insomnia, etc.
7142550	INTENSIVE MONITORING Pertains to the prolonged EEG recording (4-10) hours using video and radio telemetry systems for the purpose of documenting the EEG and certain electrophysiological characteristics of seizures of various types, ie. absences, status, unusual attacks and psychogenic seizures.
7142560	ELECTRONYSTAGMOGRAPHY/ELECTRO-OCULOGRAPHY (ENG/EOG) Pertains to the recording of various forms of eye movements including those under volitional control and those under vestibular control. They are used to help differentiate between dizziness due to inner ear problems verus that due to inner ear problems versus that due to brain pathology.
71430	OTHER DIAGNOSTIC LABORATORIES Pertains to the performance of highly specialized non-invasive procedures which determine the presence or extent of diseases of the heart and peripheral vascular system. Includes data pertaining to electrocardiography (ECG) services.
7143020	NON-INVASIVE CARDIOLOGY LABORATORY
714302020	ECHOCARDIOGRAPHY Pertains to the use of echocardiography equipment for the evaluation of the size, position, configuration and motion of structures of the heart; the assessment of anatomical relationships with the heart and the assessment of cardiac functions.
714302040	HOLTER Pertains to the continuous ECG monitoring of a patient over a prolonged period (6-24 hours) while the patient goes about his or her usual daily activities.
714302060	EXERCISE STRESS TESTING Pertains to the use of exercise, according to specific criteria, for the purpose of detecting heart disease or for quantifying cardiorespiratory function.
714302080	ELECTROPHYSIOLOGY Pertains to the study of the electrophysiological properties of the heart through non-invasive means.
714302090	ELECTROCARDIOGRAPHY Pertains to the measurement and recording of electrical impulses of the heart for the evaluation of heart and heart function.

Account Number	Description
71431	ORTHOPTICS (AB SPECIFIC)
71435	RESPIRATORY THERAPY Pertains to the administration of gases, aerosols, tests as well as those speciality services that assist in the diagnosis and treatment of patients with respiratory and cardio respiratory-related conditions. Includes the maintenance and repair of respiratory therapy, anesthesia and perfusion associated equipment.
7143520	THERAPEUTICS
714352020	ROUTINE/CRITICAL CARE, RESPIRATORY Pertains to the assessment and treatment of patients with respiratory and related conditions. Includes the maintenance and repair of respiratory therapy equipment.
714352060	HYPERBARIC CHAMBER Pertains to treatment of specific medical conditions with the use of a recompression chamber that is pressurized with compressed air and in which 100% oxygen is administered to the patient.
7143540	DIAGNOSTIC SERVICES, RESPIRATORY Pertains to the clinical investigation of patients to detect or to assess the severity of known respiratory and respiratory-related disease disability or injury. Includes the maintenance and repair of diagnostic equipment.
714354010	PULMONARY FUNCTION LAB Pertains to the detection, localization and quantification of pulmonary disorders through the use of highly specialized diagnostic procedures. Includes the maintenance and repair of pulmonary function diagnostic equipment.
714354020	BRONCHOSCOPY (AB SPECIFIC)
714354030	BLOOD GASES LAB Pertains to the analysis of blood for the purpose of measuring PH and the pressure of physiological gases.
714403010	TOTAL PARENTERAL NUTRITION – TPN – SERVICE Pertains to the formulation, preparation, distribution and monitoring of parenteral nutrition therapy. In all cases, the products are returned to inventory on a value-added basis for subsequent use by various nursing inpatient and ambulatory care areas. Includes recovery from inventory of costs of raw materials on a value-added basis.

Account Number	Description
7144050	OUTPATIENT PHARMACY SERVICES Pertains to the movement of drugs from pharmacy stores to the outpatient pharmacy and other ambulatory care areas. This function reflects the operation of health care facility's outpatient drug distribution system and includes the following activities: non-sterile compounding and pre-packaging dispensing, drug monitoring, medication history taking, medication counselling and conducting drug utilization reviews. Includes pharmacokinetic monitoring.
71445	CLINICAL NUTRITION Pertains to the provision of patient care and non-patient care activities as defined by the Clinical Workload Measurement System Conceptual Model. These activities are provided by clinical dieticians, dietary technologists, dietician assistance and/or food service providers.
71450	PHYSIOTHERAPY Pertains primarily to the prevention or alleviation of movement dysfunction in people.
71455	OCCUPATIONAL THERAPY Pertains to the analysis and application of activities especially related to occupational performance in areas of self-care, productivity and leisure.
7145520	PHYSICAL MEDICINE Pertains to the provision of occupational therapy services to patients with physical disabilities.
7145540	PSYCHIATRIC OCCUPATIONAL THERAPY Pertains to the provision of occupational therapy services to psychiatric patients.
7146020	SPEECH/LANGUAGE PATHOLOGY Pertains to the prevention, evaluation, treatment and management of language, speech, and speech voice disorders.
7146040	AUDIOLOGY Pertains to the assessment, diagnosis and treatment of patients with hearing disabilities.
7146520	PROSTHETICS Pertains to the design, fabrication and fitting of appliances to replace, in whole or in part, human organs and limbs amputated or congenitally deformed, in order to restore their function and appearance (also refer to 713507060 Pediatric Prosthetics).
7146560	SEATING SYSTEMS Pertains to the design, fabrication and fitting of seating needs destined to provide seating systems that accommodates individual needs.

Account Number	Description
71470	SOCIAL WORK Pertains to the assistance of the patient and his family in dealing with personal, socio-economic and environmental problems which influence the patient's condition.
7147010	GENERAL SOCIAL WORK
7147020	FAMILY THERAPY Pertains to family therapy for families who display disorganized or disturbed functioning.
71475	PSYCHOLOGY Pertains to the assessment and treatment of behavioral problems in patients and their families.
7147520	CLINICAL PSYCHOLOGY Pertains to the assessment and treatment of patient's behavioral problems other than those associated with known or suspected organic impairment of brain function.
7147540	NEUROPSYCHOLOGY Pertains to the utilization of special neuropsychological evaluation tools to assess the relationship between brain function and behaviour in-patients with known or suspected organ brain dysfunction. As well as the rehabilitation of such behaviours, through techniques based on the specific knowledge of the syndromes of focal and diffuse brain lesions.
71480 Invalid as of Apr 98	CHILD CARE WORK (AB SPECIFIC) Pertains to the social, play, behavioural and ADL needs of pre-school and school age children which facilitate the generalization and stabilization of skills.
71480	PASTORAL CARE Pertains to the provision and co-ordination of a religious ministry to patients and their families.
71485	RECREATION Pertains to the involvement of patients in activities such as sports and arts and crafts, in order to maintain and improve their physical, mental and social well-being.
71490	CHILD LIFE Pertains to the provision of a therapeutic program to meet the social, emotional, co-operative and physical activity needs of children in hospital, through education and recreation.
71495	COMMUNITY REHABILITATION PROGRAMS A multi-disciplinary functional centre where Physiotherapy, Occupational Therapy, Respiratory Therapy and Speech & Audiology services are provided. Also includes multidisciplinary externally contracted CRP clinics

Account Number	Description
7149535	COMMUNITY RESPIRATORY THERAPY Respiratory therapy services provided to clients who are neither registered In-patients or Out-patients. Includes externally contracted clinics.
7149550	COMMUNITY PHYSIOTHERAPY Physiotherapy services provided to clients who are neither registered In-patients or Out-patients. Includes externally contracted clinics.
7149555	COMMUNITY OCCUPATIONAL THERAPY Occupational therapy services provided to clients who are neither registered In-patients or Out-patients. Includes externally contracted clinics.
714956020	COMMUNITY SPEECH LANGUAGE PATHOLOGY Speech Language Pathology services provided to clients who are neither registered In-patients or Out-patients. Includes externally contracted clinics.
714956040	COMMUNITY AUDIOLOGY Audiology services provided to clients who are neither registered In-patients or Out-patients. Includes externally contracted clinics.
71510	PRIMARY CARE CLINICS/PROGRAMS The Functional Centre pertaining to the provision of primary health services that do not require facilities, technology, and/or staff support typically found in an ambulatory care specialty clinic to self-referred patient/clients who attend for less than three hours on average. Includes: Walk-In Clinics, Dental and Nutritional Services etc.
71515	CRISIS INTERVENTION The Functional Centre pertaining to the provision of services in response to urgent individual medical, and/pr psychological needs of clients. Includes: crisis lines and lifeline services.
71520	PRIMARY DAY/NIGHT CARE The Functional Centre pertaining to the free-standing or attached units where treatment, counselling, rehabilitative/social and recreational services are provided for clients, who attend for three to twelve hours.
71530	HOME CARE
7153010	GENERAL HOME CARE
7153020	GERIATRIC HOME CARE
7153030	PALLIATIVE HOME CARE
7153040	HOME DIALYSIS
7153050	PSYCHIATRIC HOME CARE
7153060	POST NATAL HOME CARE
7153070	HOME PARENTERAL CARE
7153080	EARLY INTERVENTION
7153090	CASE COORDINATION

Account Number	Description
71535	HOME SUPPORT The Functional Centre pertaining to providing or co-ordinating assistance to clients with daily activities such as shopping, housekeeping, food preparation and laundry.
7153510	PROVISION OF MEDICAL EQUIPMENT
7153520	SELF MANAGED CARE
71538	HOME CARE/SUPPORT COMBINED The Functional Centre pertaining to clinical services provided in clients' residences to meet the acute, long term, rehabilitative, palliative and support needs of clients and their significant others, and providing or co-ordinating assistance with daily activities such as shopping, housekeeping and laundry.
71540	RESIDENTIAL SERVICES The Functional Centre pertaining to the provision of supportive living arrangements in a residential/group home setting. Includes respite care. Excludes nursing homes.
7154010	ASSISTED LIVING
7154020	ADULT FAMILY LIVING
7154030	CHOICE
7154040	GROUP HOMES
71550	HEALTH PROMOTION AND EDUCATION The Functional Centre pertaining to promoting health, and educating the community. Including the public, professionals, and other sectors which impact on the health of individuals and populations towards maintaining/improving health statistics.
7155010	FAMILY PLANNING
7155030	GENERAL HEALTH
7155035	WOMENS HEALTH
7155045	INNER CITY
7155050	PRE-ADMISSION
71555	DISEASE AND INJURY PREVENTION & CONTROL The Functional Centre pertaining to the activities associated with reducing injury or risk of injury and the prevention of disease for individuals, community and population including such activities as immunization, screening, communicable disease control and disease surveillance.
7155510	COMMUNICABLE DISEASE PREVENTION
7155530	SEXUALLY TRANSMITTED DISEASE PREVENTION
7155540	HEREDITARY DISEASES
7155550	DENTAL HEALTH Preventative and educational dental services. Including fluoride application, teeth cleaning, diagnosis and treatment.
71558	HEALTH PROMOTION & DISEASE & INJURY PREVENTION COMBINED

Account Number	Description
71560	ENVIRONMENTAL HEALTH & LICENSING The Functional Centre pertaining to the mandated environmental health protection services to ensure that the food supply, water and other aspects of the human environment are safe from disease, contaminants and other health and safety hazards. Also pertains to activities and support services which safeguard the well being of individuals for facilities such as day care facilities and adult and child residential facilities.
7156010	ENVIRONMENTAL HEALTH The Functional Centre pertaining to the mandated environmental health protection services to ensure that the food supply, water and other aspects of the human environment are safe from disease, contaminants and other health and safety hazards.
7156020	LICENSING The Functional Centre pertaining to activities for licensing and support services which safeguard the well being of individuals for facilities such as day care facilities and adult and child residential facilities.

Alberta
HEALTH AND WELLNESS

Ambulatory
Care
Classification
System

6. DELIVERY ORGANIZATION LISTING
(alphabetic by location)

Effective May 2001

DELIVERY ORGANIZATION LISTING

alphabetic by location

Acute Care Facilities			
8001	0001	Athabasca	Athabasca Healthcare Centre
8002	0002	Banff	Banff Mineral Springs Hospital
8816		Banff	Banff Outpatient Surgical Centre
8003	0003	Barrhead	Barrhead Healthcare Centre
8004	0004	Bashaw	Bashaw Health Centre
8005	0005	Bassano	Bassano General Hospital
8006	0006	Beaverlodge	Beaverlodge Municipal Hospital
8007	0007	Bentley	Bentley Care Centre
8139	0139	Black Diamond	Oilfields General Hospital
8009	0009	Blairmore	Crowsnest Pass Health Care Centre
8141	0141	Bonnyville	Bonnyville Health Centre
8011	0011	Bow Island	Bow Island Health Centre
8012	0012	Boyle	Boyle Healthcare Centre
8013	0013	Breton	Breton General Hospital
8014	0014	Brooks	Brooks Health Centre
8015	0015	Calgary	Alberta Children's Provincial General Hospital
8826		Calgary	Anaesthesia Centre for Dentistry
8908		Calgary	Calgary Sleep Institute
8240		Calgary	Colonel Belcher Auxiliary Hospital
8818		Calgary	Dr. Donald Wakeham
8906		Calgary	Dr. Greg Storwick
8819		Calgary	Dr. Vincelli
8817		Calgary	Drs. Abrams, Whitestone & Skulsky
8016	0016	Calgary	Foothills Provincial General Hospital
8809		Calgary	Gimbel Eye Centre
8909		Calgary	HBOT Clinic
8827		Calgary	Health Resources Group
8810		Calgary	Holy Cross Surgical Services
8625		Calgary	Kensington Clinic
8904		Calgary	Laser Rejuvenation Centre/Spa
8820		Calgary	Marlborough Surgicentre
8811		Calgary	Mitchell Eye Centre
8626		Calgary	Morgentaler Clinic
8148	0148	Calgary	Peter Lougheed Hospital
8905		Calgary	Remington Laser Dermatology
8812		Calgary	Rocky Mountain Surgical Centre
8020	0020	Calgary	Rockyview General Hospital
8821		Calgary	Royal View Surgi-Centre
8813		Calgary	Surgical Centre Inc. Foothills
8814		Calgary	Surgical Centre Inc. Glenmore
8815		Calgary	Surgical Centre Inc. Southport
8021	0021	Camrose	St. Mary's Hospital

8022	0022	Canmore	Canmore General Hospital
8301	0301	Cardston	Blood Indian Hospital
8023	0023	Cardston	Cardston Municipal Hospital
8025	0025	Castor	Our Lady Of The Rosary Hospital
8026	0026	Cereal	Cereal Municipal Hospital
8027	0027	Claresholm	Claresholm General Hosptial
8207		Claresholm	Willow Creek Auxiliary Hospital
8028	0028	Coaldale	Coaldale Hospital
8029	0029	Cold Lake	Cold Lake Health Centre
8030	0030	Consort	Consort Health Centre
8031	0031	Coronation	Coronation Health Centre
8032	0032	Daysland	Daysland Health Centre
8033	0033	Devon	Devon General Hospital
8034	0034	Didsbury	Didsbury District Health Care Complex
8035	0035	Drayton Valley	Drayton Valley General Hospital
8036	0036	Drumheller	Drumheller Regional Health Complex
8037	0037	Eckville	Eckville Community Health Centre
8806		Edmonton	Alberta Eye Institute
8800		Edmonton	Buski Eye Centre & Surgical Suite
8825		Edmonton	Coronation Day Surgery Centre Ltd.
8802		Edmonton	David Climenhaga Prof. Corp.
8900		Edmonton	Dental Surgery Group
8807		Edmonton	Don Groot Prof. Corp./Dermasurgery Centre
8902		Edmonton	Dr. Barry Lyka
8901		Edmonton	Dr. E. Hodges
8903		Edmonton	Dr. J. Keohane Jr.
8915		Edmonton	Dr. M. Bochinski
8824		Edmonton	Dr. Randall Kruetz
8805		Edmonton	Dr. Royce Johnson
8298		Edmonton	Edmonton General Auxiliary
8803		Edmonton	Gimbel Eye Centre
8242		Edmonton	Glenrose Rehab/NARG
8042	0042	Edmonton	Grey Nun's Hospital
8041	0041	Edmonton	Misericordia Hospital
8149		Edmonton	Northeast Community Health Centre
8808		Edmonton	Plastic & Cosmetic Laser Surgical Centre
8043	0043	Edmonton	Royal Alexandra Hospital
8804		Edmonton	Surgical Centres Inc.
8823		Edmonton	Thomas Stevenson, Darrell Andrew Paul Gotaas, E. Wayne Tunis – South Edmonton Oral Surgery
8044	0044	Edmonton	University Of Alberta Hospital
8822		Edmonton	Walter Dobrovolsky, Terence Vankka – Kingsway Oral Surgery
8045	0045	Edson	Edson & District Healthcare Centre

8046	0046	Elk Point	Elk Point Health Centre
8047	0047	Elnora	Elnora Community Health Centre
8048	0048	Empress	Empress Health Centre
8049	0049	Fairview	Fairview General Hospital
8050	0050	Fort Macleod	Fort MacLeod Health Care Centre
8117	0117	Fort Mcmurray	Northern Lights Regional Health Centre
8052	0052	Fort Saskatchewan	Fort Saskatchewan Health Centre
8053	0053	Fort Vermilion	St Theresa General Hospital
8133	0133	Fox Creek	Fox Creek Healthcare Centre
8054	0054	Galahad	Galahad Health Centre
8055	0055	Glendon	Glendon Health Centre
8121	0121	Grande Cache	Grande Cache General Hospital
8056	0056	Grande Prairie	Queen Elizabeth II Hosp - Acute
8132	0132	Grimshaw	Grimshaw Berwyn District Hospital
8057	0057	Hanna	Hanna General Hospital
8058	0058	Hardisty	Hardisty Health Centre
8123	0123	High Level	High Level General Hospital
8059	0059	High Prairie	High Prairie Health Complex
8060	0060	High River	High River General Hospital
8061	0061	Hinton	Hinton General Hospital
8062	0062	Hythe	Hythe Municipal Hospital
8063	0063	Innisfail	Innisfail Health Centre
8064	0064	Islay	Islay Health Centre
8065	0065	Jasper	Seton General Hospital
8066	0066	Killam	Killam Health Centre
8067	0067	Lac La Biche	William J Cadzow Health Centre
8068	0068	Lacombe	Lacombe Hospital & Care Centre
8069	0069	Lamont	Lamont Health Centre
8070	0070	Leduc	Leduc General Hospital
8911		Lethbridge	Dr. Brian Murray
8912		Lethbridge	Dr. Paul Hall
8071	0071	Lethbridge	Lethbridge Regional Hospital
8075	0075	Magrath	Magrath Municipal Hospital
8076	0076	Manning	Manning Community Health Centre
8077	0077	Mannville	Mannville Health Centre
8078	0078	Mayerthorpe	Mayerthorpe Healthcare Centre
8074	0074	McLennan	Sacred Heart Community Health Centre
8079	0079	Medicine Hat	Medicine Hat Regional Hospital
8080	0080	Milk River	Border Counties Hospital
8081	0081	Mundare	Mary Immaculate Hospital
8082	0082	Myrnam	Myrnam Health Centre
8083	0083	Olds	Olds Hospital & Care Centre
8084	0084	Oyen	Big Country Hospital
8085	0085	Peace River	Peace River Community Health Centre
8086	0086	Picture Butte	Picture Butte Hospital
8087	0087	Pincher Creek	Pincher Creek Hospital

8088	0088	Ponoka	Ponoka Hospital and Care Centre
8089	0089	Provost	Provost Health Centre
8235		Radway	Radway Health Care Centre
8145	0145	Rainbow Lake	Rainbow Lake Health Centre
8091	0091	Raymond	Raymond Hospital
8914		Red Deer	Dr. G. Nye
8913		Red Deer	Dr. Stuart Maslove Prof. Corp.
8092	0092	Red Deer	Red Deer Regional Hospital Centre
8122	0122	Redwater	Redwater Health Centre
8093	0093	Rimbey	Rimbey Hospital & Care Centre
8094	0094	Rocky Mountain House	Rocky Mountain House Hospital & Care
8118	0118	Slave Lake	Slave Lake Health Complex
8095	0095	Smoky Lake	George McDougall Health Centre
8096	0096	Spirit River	Central Peace General Hospital
8120	0120	St Albert	Sturgeon General Hospital
8099	0099	St Paul	St Therese Health Centre
8097	0097	Stettler	Stettler Health Centre
8150	0150	Stony Plain	WestView Health Centre
8134	0134	Strathmore	Valley General Hospital & Extended Care Centre
8119	0119	Sundre	Sundre General Hospital
8136	0136	Swan Hills	Swan Hills Healthcare Centre
8100	0100	Taber	Taber & District Health Care Centre
8101	0101	Three Hills	Three Hills Health Care Centre
8102	0102	Tofield	Tofield Health Centre
8103	0103	Trochu	St Mary's Health Care Centre
8105	0105	Two Hills	Two Hills Health Centre
8106	0106	Valleyview	Valleyview Health Centre
8107	0107	Vegreville	St Joseph's General Hospital
8108	0108	Vermilion	Vermilion Health Centre
8109	0109	Viking	Viking Health Centre
8110	0110	Vilna	Our Lady's Health Centre
8111	0111	Vulcan	Vulcan Complex Health Centre
8144	0144	Wabasca	Wabasca Desmarais Gen Hospital
8112	0112	Wainwright	Wainwright Health Centre
8113	0113	Westlock	Westlock Healthcare Centre
8114	0114	Wetaskiwin	Wetaskiwin General Hospital
8116	0116	Whitecourt	Whitecourt Healthcare Centre
8115	0115	Willingdon	Mary Immaculate Hospital
Rehabilitation Institution			
8040	4040	Edmonton	Glenrose Rehabilitation Hospital
Psychiatric Institutions			
8669		Claresholm	Claresholm Care Centre Pyschiatric Rehab
8137	5137	Edmonton	Alberta Hospital Edmonton
8138	5138	Ponoka	Alberta Hospital Ponoka

Cancer Facilities			
8601		Calgary	Tom Baker Cancer Centre
8038	0038	Edmonton	Cross Cancer Institute
8605		Grande Prairie	Grande Prairie Cancer Centre
8603		Lethbridge	Lethbridge Cancer Centre
8604		Medicine Hat	Medicine Hat Cancer Centre
8602		Red Deer	Central Alberta Cancer Centre
Out-of-Province/Country Acute Care Hospital			
9999	9999		Out-of-Province/Country Acute Care Hospital
Unknown Provincial Acute Care Hospital			
9996	9996		Unknown Provincial Acute Care Hospital
Non-Hospital Regional Service Delivery Organizations			
8330			Chinook
8331			Palliser
8332			Headwaters
8333			Calgary
8334			Health Authority 5
8335			David Thompson
8336			East Central
8337			Westview
8338			Crossroads
8339			Capital
8340			Aspen
8341			Lakeland
8342			Mistahia
8343			Peace
8344			Keeweetinok Lakes
8345			Northern Lights
8346			Northwestern

Alberta
HEALTH AND WELLNESS

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ACCS GROUPER
Flowcharts, Diagnoses and Interventions

Effective April 2000

Ambulatory Care Classification Documentation

ACCS GROUPER: Flowcharts, Diagnoses and Interventions

Revised April 2000

In this section of the documentation, flowcharts and tables are presented for each of the ACCS intervention and clinical groups. The tables identify ICD-9-CM diagnoses, ICD-9-CM interventions or developed ACCS intervention codes that group to each of the ACCS cells.

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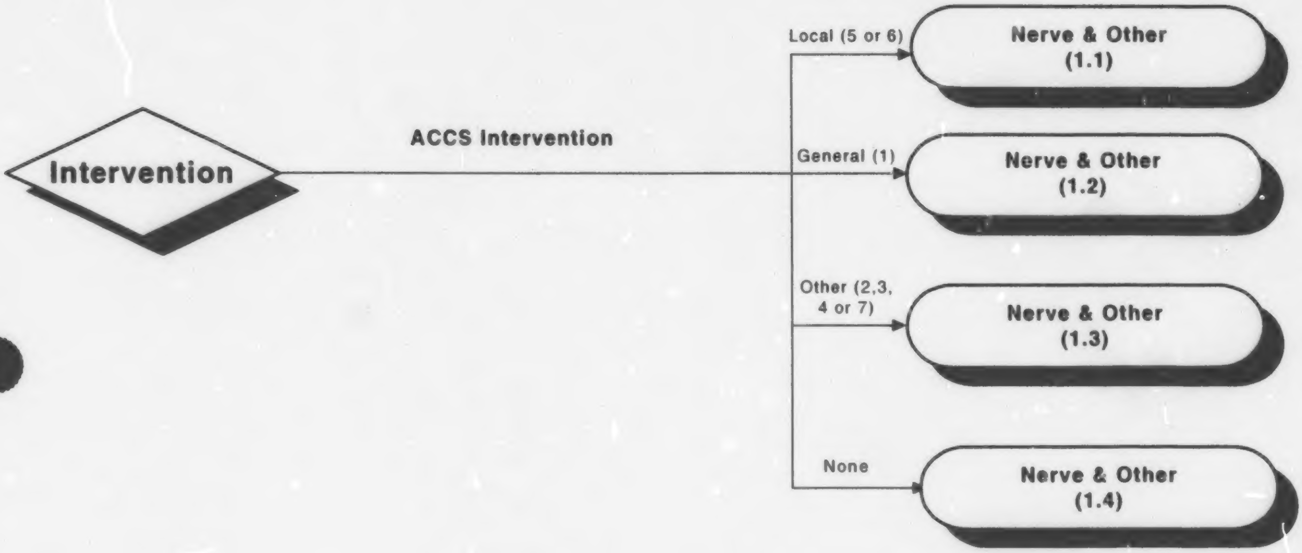
ACCS Intervention Cell

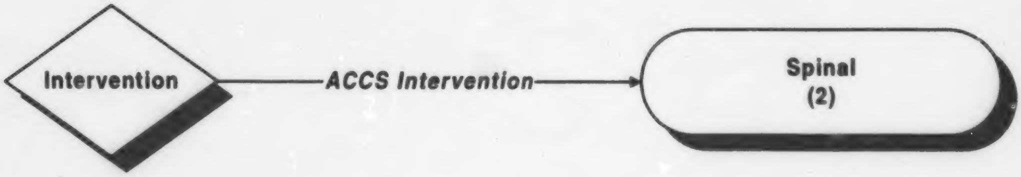

Intervention
ACCS Intervention
Local (5 or 6)
Nerve & Other (1.1)
General (1)
Nerve & Other (1.2)
Other (2,3, 4 or 7)
Nerve & Other (1.3)
None
Nerve & Other (1.4)

ACCS Grouper
04/00

ACCS CELL
1.1 Nerve and Other

ACCS Cell	ICD-9-CM Code	ICD-9-CM Description
1.1 TO 1.4 NERVE & OTHER	0113	CLOSED BIOPSY OF BRAIN
	0114	OPEN BIOPSY OF BRAIN
	0115	BIOPSY OF SKULL
	016	EXCISION OF LESION OF SKULL
	0242	REPLACEMENT VENTRICULAR SHUNT
	0403	DIVIS/CRUSH OTH CRAN/PERIPH NRV
	0404	OTH INCISION CRAN/PERIPH NERVES
	0405	GASSERIAN GANGLIONECTOMY
	0406	OTH CRAN/PERIPH GANGLIONECTOMY
	0407	OTH EXCIS/AVULS CRAN/PERIPH NRV
	0411	CL BIOPSY CRAN/PERIPH NRV/GANGL
	0412	OP BIOPSY CRAN/PERIPH NRV/GANGL
	043	SUTURE CRANIAL/PERIPHERAL NERVE
	0441	DECOMPRES TRIGEMINAL NERVE ROOT
	0442	OTH CRANIAL NERVE DECOMPRESSION
	0443	RELEASE OF CARPAL TUNNEL
	0444	RELEASE OF TARSAL TUNNEL
	0449	OTH PERIPH NRV/GANGLN DECOMPRES
	045	CRANIAL/PERIPHERAL NERVE GRAFT
	046	TRANSPOSITION CRAN/PERIPH NERVE
	0471	HYPOGLOSSAL-FACIAL ANASTOMOSIS
	0472	ACCESSORY-FACIAL ANASTOMOSIS
	0473	ACCESSORY-HYPOGLOSSAL ANASTOMOS
	0474	OTH ANASTOMOSIS CRAN/PERIPH NRV
	0475	REVIS PREV REPR CRAN/PERIPH NRV
	0476	REPR OLD INJURY CRAN/PERIPH NRV
	0479	OTHER NEUROPLASTY
	0492	IMPLANT/REPLAC PERIPH NEUROSTIM
	0493	REMOVAL PERIPH NEUROSTIMULATOR
	0499	OTHER OPERAT CRAN/PERIPH NERVES
	0511	BIOPSY SYMPATHETIC NERVE/GANGLN
	0522	CERVICAL SYMPATHECTOMY
	0529	OTHER SYMPATHECTOMY/GANGLIONECT
	0581	REPAIR SYMPATHETIC NERVE/GANGLN
	0589	OTH OP SYMPATHETIC NERVE/GANGLN
	8050	EXCIS/DESTR INTERVERT DISC NOS
	8051	EXCISION OF INTERVERTEBRAL DISC
	8059	OTH DESTRUCTION INTERVERT DISC

ACCS Intervention Cell

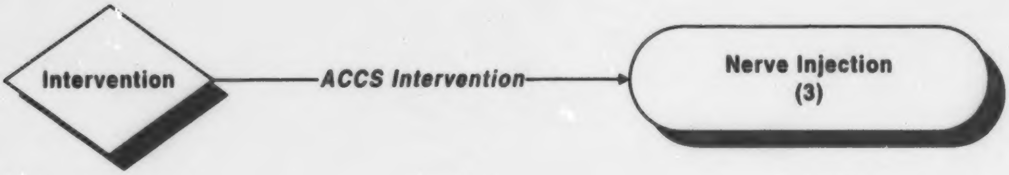


ACCS Grouper
09/98

ACCS CELL
2 Spinal

ACCS Cell	ICD-9-CM Code	ICD-9-CM Description
2 SPINAL	031	DIVISION INTRASPINAL NERVE ROOT
	0321	PERCUTANEOUS CHORDOTOMY
	0329	OTHER CHORDOTOMY
	0331	SPINAL TAP
	0332	BIOPSY OF SPINAL CORD/MENINGES
	038	INJECT DESTR AGENT SPINAL CANAL
	0390	INSRT CATH SPIN/INFUS THER SUBS
	0391	INJECTN ANESTHETIC SPINAL CANAL
	0392	INJECT OTHER AGENT SPINAL CANAL
	0394	REMOVAL SPINAL NEUROSTIMULATOR
	0395	SPINAL BLOOD PATCH
	0396	PERCUTANEOUS DENERVATION FACET
	042	DESTRUCTION CRAN/PERIPH NERVES
	0532	INJECT NEUROLYTIC SYMPATH NERVE
	8052	INTERVERTEBRAL CHEMONUCLEOLYSIS

ACCS Intervention Cell

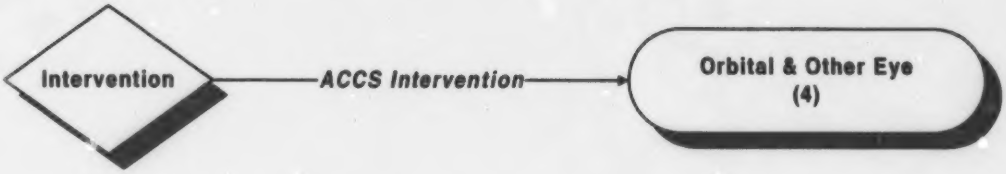

Intervention
ACCS Intervention
Nerve Injection
(3)

ACCS Grouper
09/98

ACCS CELL
3 Nerve Injection

ACCS Cell	ICD-9-CM Code	ICD-9-CM Description
3 NERVE INJECTION	0402	DIVISION OF TRIGEMINAL NERVE
	0480	PERIPHERAL NERVE INJECTION NOS
	0481	INJCT ANESTH PERIPH NRV ANALGES
	0489	INJCT AGNT EXC NEUROLYT PER NRV
	0531	INJECT ANESTH SYMPATH NRV ANALG
	0539	OTH INJECT SYMPATH NERVE/GANGLN

ACCS Intervention Cell



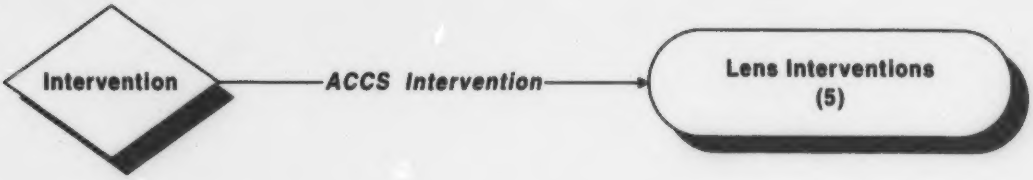
ACCS Grouper
09/98

ACCS CELL
4 Orbital and Other Eye

ACCS Cell	ICD-9-CM Code	ICD-9-CM Description
4 ORBITAL AND OTHER EYE	0832	REPR BLEPH FRONT TECH/FASC SLNG
	0833	REPR BLEPH RESECT/ADVANCE LEVAT
	0834	REPR BLEPH OTH LEVAT MUSC TECH
	0835	REPR BLEPHAROPTOSIS TARSAL TECH
	0836	REPR BLEPHAROPTOSIS OTHER TECH
	0837	REDUCTION OVERCORRECTION PTOSIS
	0838	CORRECTION OF LID RETRACTION
	0841	REPR ENTROPN/ECTROPN THERMOCAUT
	0844	REPR ENTROP/ECTROPN LID RECONST
	0851	CANTHOTOMY
	0859	OTHER ADJUSTMENT LID POSITION
	0862	RECONST LID MUC MEMB FLAP/GRAFT
	0899	OTHER OPERATIONS ON EYELIDS
	0911	BIOPSY OF LACRIMAL GLAND
	0912	BIOPSY OF LACRIMAL SAC
	0920	EXCISION OF LACRIMAL GLAND NOS
	0921	EXCISION LESION LACRIMAL GLAND
	0923	TOTAL DACRYOADENECTOMY
	0953	INCISION OF LACRIMAL SAC
	096	EXCISION LACRIMAL SAC/PASSAGE
	100	REMOV EMBEDD FB CONJUNCT INCIS
	101	OTHER INCISION OF CONJUNCTIVA
	1041	REPAIR SYMBLEPHARON FREE GRAFT
	1044	OTHER FREE GRAFT TO CONJUNCTIVA
	1049	OTHER CONJUNCTIVOPLASTY
	1091	SUBCONJUNCTIVAL INJECTION
	1121	SCRAPING CORNEA SMEAR/CULTURE
	1122	BIOPSY OF CORNEA
	1131	TRANSPOSITION OF PTERYGIUM
	1132	EXCIS PTERYGIUM W CORNEAL GRF
	1139	OTHER EXCISION OF PTERYGIUM
	1141	MECH REMOVAL CORNEAL EPITHELIUM
	1151	SUTURE OF CORNEAL LACERATION
	1152	REPR POSTOP WOUND DEHISC CORNEA
	1153	REPR CORNEAL LACN/WOUND W FLAP
	1159	OTHER REPAIR OF CORNEA
	1160	CORNEAL TRANSPLANT NOS
	1161	LAMELLAR KERATOPLASTY W AUTOGRF

ACCS Cell	ICD-9-CM Code	ICD-9-CM Description
4 ORBITAL AND OTHER EYE	1162	OTHER LAMELLAR KERATOPLASTY
	1164	OTHER PENETRATING KERATOPLASTY
	1169	OTHER CORNEAL TRANSPLANT
	1176	EPIKERATOPHAKIA
	1179	OTH RECONST/REFRACT SURG CORNEA
	1199	OTHER OPERATIONS ON CORNEA
	1202	REMOV INTRAOC FB ANT EYE/NO MAG
	1264	TRABECULECTOMY AB EXTERNO
	1281	SUTURE OF LACERATION OF SCLERA
	1282	REPAIR OF SCLERAL FISTULA
	1287	SCLERAL REINFORCEMENT W GRAFT
	1288	OTHER SCLERAL REINFORCEMENT
	1292	INJECTION INTO ANTERIOR CHAMBER
	1299	OTH OPERATIONS ANTERIOR CHAMBER
	1411	DIAGNOSTIC ASPIRATION VITREOUS
	1441	SCLERAL BUCKLING WITH IMPLANT
	1449	OTHER SCLERAL BUCKLING
	1471	REMOVAL VITREOUS ANT APPROACH
	1472	OTHER REMOVAL OF VITREOUS
	1473	MECH VITRECTOMY ANT APPROACH
	1474	OTHER MECHANICAL VITRECTOMY
	1602	ORBITOTOMY W INSERT ORB IMPLANT
	1609	OTHER ORBITOTOMY
	1623	BIOPSY OF EYEBALL AND ORBIT
	1631	REMOV OCULAR CONTENTS W IMPLANT
	1641	ENUCLEAT EYEBALL W IMPL TENON'S
	1642	ENUCLEAT EYEBALL W OTH IMPLANT
	1649	OTHER ENUCLEATION OF EYEBALL
	1651	EXENTERAT ORB/REMOV ADJAC STRUC
	1659	OTHER EXENTERATION OF ORBIT
	1661	SECONDARY INSERT OCULAR IMPLANT
	1662	REVISN/REINSERTN OCULAR IMPLANT
	1663	REVIS ENUCLEATION SOCKET/GRAFT
	1664	OTH REVISION ENUCLEATION SOCKET
	1665	SECOND GRAFT EXENTERATION CAV
	1666	OTHER REVISION EXENTERATION CAV
	1681	REPAIR OF WOUND OF ORBIT
	1682	REPAIR OF RUPTURE OF EYEBALL
	1689	OTH REPAIR INJURY EYEBALL/ORBIT
	1698	OTHER OPERATIONS ON ORBIT

ACCS Intervention Cell

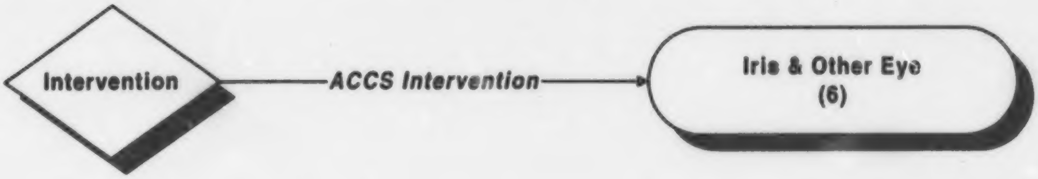


ACCS Grouper
04/00

ACCS CELL
5 Lens Interventions

ACCS Cell	ICD-9-CM Code	ICD-9-CM Description
5 LENS INTERVENTIONS	1300	REMOVAL FOREIGN BODY LENS NOS
	1302	REMOVAL FB FROM LENS NO MAGNET
	1311	INTRACAPS EXTRC LENS TEMP INFER
	1319	OTH INTRACAPSULAR EXTRACT LENS
	132	EXTRACAPS EXTRACT LENS LINEAR
	133	EXTRACAPS EXTRACT LENS ASPIRAT
	1341	PHACOEMULSIFICAT/ASPIR CATARACT
	1342	MECH PHACOFRAG/POST ASPIR CATAR
	1343	MECH PHACOFRAG/OTH ASPIR CATAR
	1351	EXTRACAPS EXTRC LENS TEMP INFER
	1359	OTH EXTRACAPSULAR EXTRACT LENS
	1364	DISCISSION SECONDARY MEMBRANE
	1366	MECH FRAGMENT SECOND MEMBRANE
	1369	OTHER CATARACT EXTRACTION
	1370	INSERTION OF PSEUDOPHAKOS NOS
	1371	INSRT LENS PROSTH W CAT EXTRACT
	1372	SECONDARY INSERTION LENS PROSTH
	138	REMOVAL OF IMPLANTED LENS
	139	OTHER OPERATIONS ON LENS

ACCS Intervention Cell

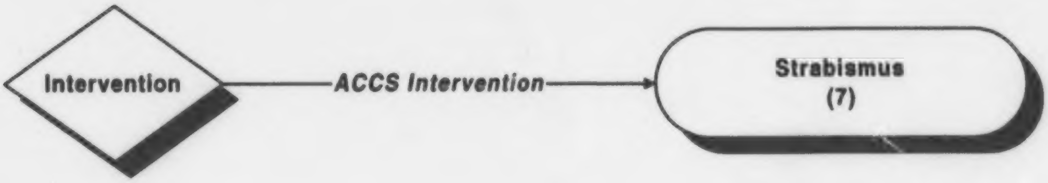


ACCS Grouper
09/98

ACCS CELL
6 Iris and Other Eye

ACCS Cell	ICD-9-CM Code	ICD-9-CM Description
6 IRIS AND OTHER EYE	1175	RADIAL KERATOTOMY
	1211	IRIDOTOMY WITH TRANSFIXION
	1213	EXCISION OF PROLAPSED IRIS
	1235	COREOPLASTY
	1239	OTHER IRIDOPLASTY
	1242	EXCISION OF LESION OF IRIS
	1243	DESTR LES CILIARY BODY NONEXCIS
	1244	EXCISION OF LESION CILIARY BODY
	1254	TRABECULOTOMY AB EXTERNO
	1262	THERMOCAUTER SCLERA IRIDECTOMY
	1265	OTH SCLERAL FISTULIZ W IRIDECT
	1271	CYCLODIATHERMY
	1298	OTHER OPERATIONS CILIARY BODY
	1422	DESTR CHORIORET LESION CRYOTHER
	1431	REPAIR RETINAL TEAR W DIATHERMY
	1432	REPAIR RETINAL TEAR W CRYOTHER
	1433	REPAIR RETINAL TEAR W XENON ARC
	1434	REPR RETINAL TEAR W LASER PHOT
	1435	REPR RETINAL TEAR W UNSPEC PHOT
	1439	OTHER REPAIR OF RETINAL TEAR
	1452	REPR RETINAL DETACH W CRYOTHER
	1454	REPR RETIN DETACH W LASER PHOT
	1459	OTHER REPAIR OF RETINAL DETACH
	146	REMOV SURG IMPLANT POST SEGMENT
	1479	OTHER OPERATIONS ON VITREOUS
	149	OTH OP RET/CHOROID/POST CHAMBER
	1621	OPHTHALMOSCOPY
	1671	REMOVAL OF OCULAR IMPLANT
	1691	RETROBULBAR INJECTN THER AGENT
	1692	EXCISION OF LESION OF ORBIT

ACCS Intervention Cell



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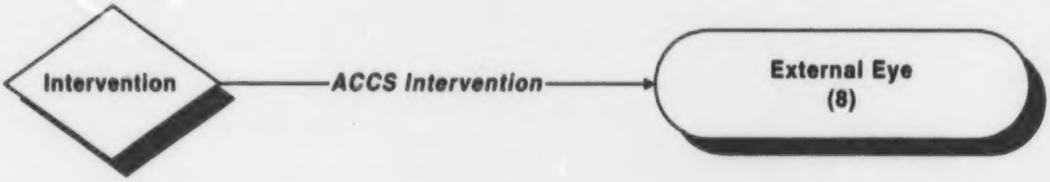
ACCS CELL
7 Strabismus

ACCS Cell	ICD-9-CM Code	ICD-9-CM Description
7 STRABISMUS	1511	RECESSION ONE EXTRAOCULAR MUSC
	1512	ADVANCEMENT ONE EXTRAOC MUSCLE
	1513	RESECTION ONE EXTRAOCULAR MUSC
	1519	OTH OP ONE EXTRAOC MUSC/DETACH
	1521	LENGTHEN PROC ONE EXTRAOC MUSC
	1522	SHORTEN PROC ONE EXTRAOC MUSCLE
	1529	OTHER OP ONE EXTRAOCULAR MUSCLE
	153	OP TWO/MORE EXTRAOC MUSC/DETACH
	154	OTH OP TWO/MORE EXTRAOC MUSCLES
	155	TRANSPOSITION EXTRAOCULAR MUSC
	156	REVISION EXTRAOCULAR MUSC SURG
	157	REPR INJURY EXTRAOCULAR MUSCLE
	159	OTH OP EXTRAOC MUSCLES/TENDONS

ACCS Intervention Cell



ACCS Grouper
09/98

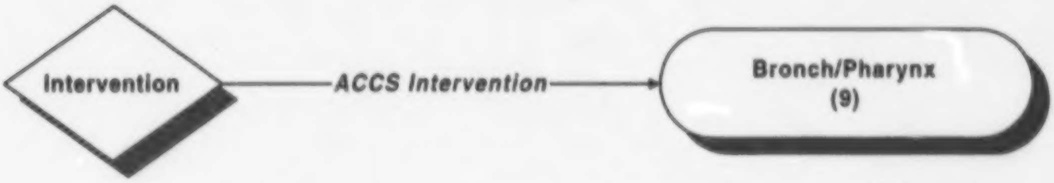
ACCS CELL
8 External Eye

ACCS Cell	ICD-9-CM Code	ICD-9-CM Description
8 EXTERNAL EYE	0801	INCISION OF LID MARGIN
	0802	SEVERING OF BLEPHARORRHAPHY
	0809	OTHER INCISION OF EYELID
	0811	BIOPSY OF EYELID
	0820	REMOVAL OF LESION OF EYELID NOS
	0821	EXCISION OF CHALAZION
	0822	EXCIS OTH MINOR LESION EYELID
	0823	EXCIS MAJ LES EYELID PART-THICK
	0824	EXCIS MAJ LES EYELID FULL-THICK
	0825	DESTRUCTION OF LESION OF EYELID
	0831	REPR BLEPH FRONT MUSC TECH/SUT
	0842	REPR ENTROP/ECTROPN SUTURE TECH
	0843	REPAIR ENT/ECTROPN WEDGE RESECT
	0849	OTH REPAIR ENTROPION/ECTROPION
	0852	BLEPHARORRHAPHY
	0861	RECONST EYELID SKIN FLAP/GRAFT
	0863	RECONST LID HAIR FOLLICLE GRAFT
	0864	RECONST LID TARSOCONJUNCT FLAP
	0869	OTH RECONST EYELID W FLAP/GRAFT
	0870	RECONSTRUCTION OF EYELID NOS
	0871	RECONST LID MARGIN PART-THICK
	0872	OTHER RECONST EYELID PART-THICK
	0873	RECONST LID MARGIN FULL-THICK
	0874	OTHER RECONST EYELID FULL-THICK
	0881	LINEAR REPAIR LACN EYELID/BROW
	0882	REPR LACN LID MARGIN PART-THICK
	0883	OTH REPR LACN EYELID PART-THICK
	0884	REPR LACN LID MARGIN FULL-THICK
	0885	OTH REPR LACN EYELID FULL-THICK
	0886	LOWER EYELID RHYTIDECTOMY
	0887	UPPER EYELID RHYTIDECTOMY
	0889	OTHER EYELID REPAIR
	0891	ELECTROSURGICAL EPILATN EYELID
	0892	CRYOSURGICAL EPILATION EYELID
	0893	OTHER EPILATION OF EYELID

ACCS Cell	ICD-9-CM Code	ICD-9-CM Description
8 EXTERNAL EYE	090	INCISION OF LACRIMAL GLAND
	0919	OTH DX PROCEDURES LACRIMAL SYS
	0941	PROBING OF LACRIMAL PUNCTUM
	0942	PROBING OF LACRIMAL CANALICULI
	0943	PROBING OF NASOLACRIMAL DUCT
	0944	INTUBATION OF NASOLACRIMAL DUCT
	0949	OTH MANIPULATN LACRIMAL PASSAGE
	0951	INCISION OF LACRIMAL PUNCTUM
	0952	INCISION OF LACRIMAL CANALICULI
	0959	OTH INCISION LACRIMAL PASSAGES
	0971	CORRECTION OF EVERTED PUNCTUM
	0972	OTHER REPAIR OF PUNCTUM
	0973	REPAIR OF CANALICULUS
	0991	OBLITERATION LACRIMAL PUNCTUM
	0999	OTH OPERATIONS LACRIMAL SYSTEM
	1021	BIOPSY OF CONJUNCTIVA
	1031	EXCISION LES/TISSUE CONJUNCTIVA
	1032	DESTRUCTION LESION CONJUNCTIVA
	1033	OTHER DESTRUCT PROC CONJUNCTIVA
	105	LYSIS ADHES CONJUNCTIVA/EYELID
	106	REPAIR LACERATION CONJUNCTIVA
	1099	OTHER OPERATIONS ON CONJUNCTIVA
	111	INCISION OF CORNEA
	1129	OTHER DX PROCEDURES ON CORNEA
	1142	THERMOCAUTERIZATION CORNEAL LES
	1149	OTH REMOV/DESTRUCT CORNEAL LES
	1192	REMOVAL ARTIFIC IMPLANT CORNEA
	1200	REMOVAL INTRAOC FB ANT EYE NOS
	1201	REMOV INTRAOC FB ANT EYE/MAGNET
	1212	OTHER IRIDOTOMY
	1214	OTHER IRIDECTOMY
	1221	DX ASPIRAT ANTERIOR CHAMBER EYE
	1229	OTH DX PROC IRIS/CIL/SCLERA/ANT
	1232	LYSIS OTHER ANTERIOR SYNECHIAE
	1233	LYSIS OF POSTERIOR SYNECHIAE
	1234	LYSIS CORNEOVITREAL ADHESIONS
	1240	REMOVAL LESION ANTERIOR EYE NOS
	1241	DESTRUCTION LES IRIS NONEXCIS
	1259	OTH FACILITATN INTRAOCULAR CIRC
	1266	POSTOP REVISN SCLERAL FISTULIZ
	1269	OTHER FISTULIZING PROCEDURE
	1272	CYCLOCRYOTHERAPY
	1273	CYCLOPHOTOCOAGULATION
	1274	DIMINUTION OF CILIARY BODY NOS
	1279	OTHER GLAUCOMA PROCEDURES
	1284	EXCIS/DESTRUCTION LESION SCLERA
	1289	OTHER OPERATIONS ON SCLERA
	1291	THER EVACUATN ANTERIOR CHAMBER
	1293	REMOV EPITH DOWNGROW ANT CHAMB
	1297	OTHER OPERATIONS ON IRIS
	1365	EXCISION SECONDARY MEMBRANE
	1419	OTH DX RET/CHOR/VITREOUS/POST
	1421	DESTR CHORIORETINAL LES DIATH
	1423	DESTR CHORIORET LES XENON ARC
	1424	DESTR CHORIORETINAL LES LASER
	1425	DESTR CHORIORET LESION PHOT NOS
	1426	DESTR CHORIORET LES RADIATION
	1427	DESTR CHORIORET LES RAD IMPLANT

ACCS Cell	ICD-9-CM Code	ICD-9-CM Description
8 EXTERNAL EYE	1429	OTH DESTRUCT CHORIORETINAL LES
	1475	INJECTION VITREOUS SUBSTITUTE
	1501	BIOPSY EXTRAOCULAR MUSCLE/TEND
	161	REMOVAL PENETRATING FB EYE NOS
	1622	DIAGNOSTIC ASPIRATION OF ORBIT
	1639	OTHER EVISCERATION OF EYEBALL
	1669	OTH SECOND PROC AFTER REMOV EYE
	1672	REMOVAL OF ORBITAL IMPLANT
	1693	EXCISION LESION EYE STRUCT NOS
	1699	OTHER OPERATIONS ON EYEBALL
	9504	EYE EXAMINATION UNDER ANESTH
	9651	IRRIGATION OF EYE
	9731	REMOVAL OF EYE PROSTHESIS
	9821	REMOV SUPERFIC FB EYE NO INCIS

ACCS Intervention Cell

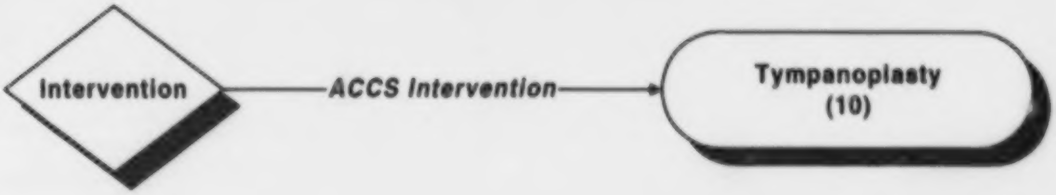


ACCS Grouper
09/98

ACCS CELL
9 Bronch/Pharynx

ACCS Cell	ICD-9-CM Code	ICD-9-CM Description
9 BRONCH/PHARYNX	292	EXCIS BRANCH CLEFT CYST/VESTIGE
	294	PLASTIC OPERATION ON PHARYNX
	2952	CLOSURE BRANCHIAL CLEFT FISTULA
	3001	MARSUPIALIZATION LARYNGEAL CYST
	311	TEMPORARY TRACHEOSTOMY
	313	OTHER INCISION LARYNX/TRACHEA
	315	LOC EXCIS/DESTR LES/TIS TRACHEA
	3173	CLOSURE OTHER FISTULA TRACHEA
	3222	LUNG VOLUME REDUCTION SURGERY
	3229	OTH LOC EXC/DESTR LES/TISS LUNG
	331	INCISION OF LUNG
	3401	INCISION OF CHEST WALL
	3473	CLOSURE OF OTHER FISTULA THORAX
	3474	REPAIR OF PECTUS DEFORMITY
	9749	REMOVAL OF OTHER DEVICE THORAX

ACCS Intervention Cell

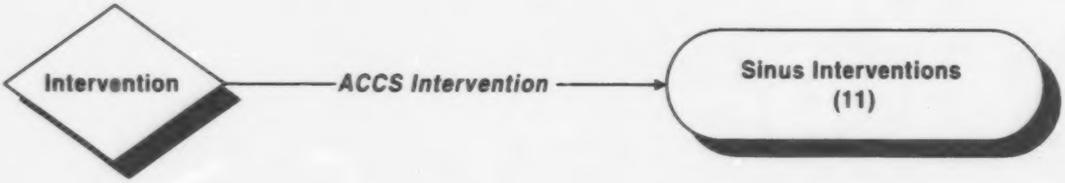


ACCS Grouper
09/98

ACCS CELL
10 Tympanoplasty

ACCS Cell	ICD-9-CM Code	ICD-9-CM Description
10 TYMPANOPLASTY	190	STAPES MOBILIZATION
	1911	STAPEDECTOMY WITH INCUS REPLACE
	1919	OTHER STAPEDECTOMY
	1921	REVIS STAPEDECT W INCUS REPLACE
	1929	OTHER REVISION OF STAPEDECTOMY
	193	OTH OPERATIONS OSSICULAR CHAIN
	194	MYRINGOPLASTY
	1952	TYPE II TYMPANOPLASTY
	1953	TYPE III TYMPANOPLASTY
	1954	TYPE IV TYMPANOPLASTY
	1955	TYPE V TYMPANOPLASTY
	196	REVISION OF TYMPANOPLASTY
	199	OTHER REPAIR OF MIDDLE EAR
	2021	INCISION OF MASTOID
	2023	INCISION OF MIDDLE EAR
	2051	EXCISION OF LESION MIDDLE EAR
	2059	OTHER EXCISION OF MIDDLE EAR
	2062	REVISION FENESTRATION INNER EAR
	2091	TYMPANOSYMPATHECTOMY
	2093	REPAIR OVAL AND ROUND WINDOWS
	2099	OTH OPERATIONS MIDDLE/INNER EAR

ACCS Intervention Cell

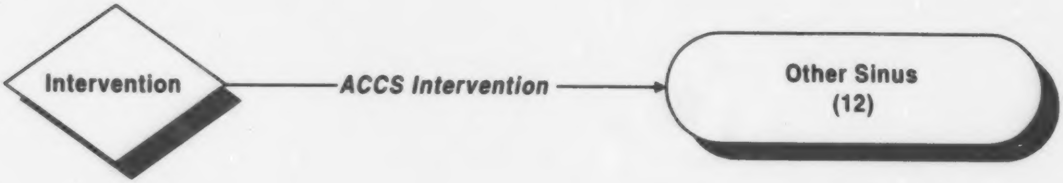


ACCS Grouper
09/98

ACCS CELL
11 Sinus Interventions

ACCS Cell	ICD-9-CM Code	ICD-9-CM Description
11 SINUS INTERVENTIONS	0981	DACRYOCYSTORHINOSTOMY
	0982	CONJUNCTIVOCYSTORHINOSTOMY
	0983	CONJUNCTIVORHINOST/INSERT TUBE
	2041	SIMPLE MASTOIDECTOMY
	2042	RADICAL MASTOIDECTOMY
	2049	OTHER MASTOIDECTOMY
	2092	REVISION OF MASTOIDECTOMY
	2231	RADICAL MAXILLARY ANTROTOMY
	2239	OTHER EXT MAXILLARY ANTROTOMY
	2241	FRONTAL SINUSOTOMY
	2251	ETHMOIDOTOMY
	2252	SPHENOIDOTOMY
	2253	INCISION MULTIPLE NASAL SINUSES
	2260	SINUSECTOMY NOS
	2261	EXCIS LES MAXIL SIN CALDWEL-LUC
	2262	EXCIS LES MAXIL SIN OTH APPRCH
	2263	ETHMOIDECTOMY
	2264	SPHENOIDECTOMY
	2271	CLOSURE OF NASAL SINUS FISTULA
	2279	OTHER REPAIR OF NASAL SINUS
	229	OTHER OPERATIONS NASAL SINUSES

ACCS Intervention Cell

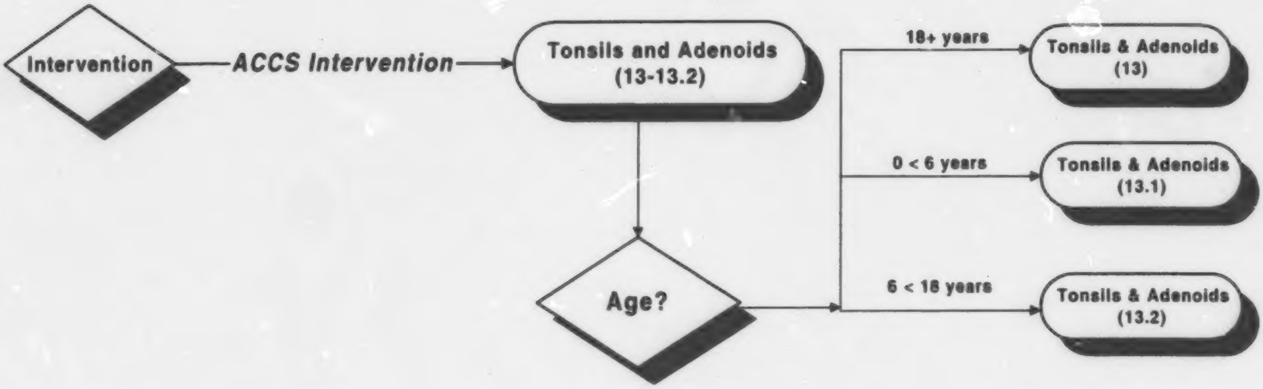


ACCS Grouper
09/98

ACCS CELL
12 Other Sinus

ACCS Cell	ICD-9-CM Code	ICD-9-CM Description
12 OTHER SINUS	2104	CONTR EPISTAX LIGAT ETHMOID ART
	211	INCISION OF NOSE
	2131	LOCAL EXCIS/DESTR INTRANASL LES
	2161	TURBINECTOMY DIATHERMY/CRYOSURG
	2162	FRACTURE OF THE TURBINATES
	2219	OTHER DX PROC ON NASAL SINUSES
	2250	SINUSOTOMY NOS
	260	INCISION OF SALIVARY GLAND/DUCT
	2621	MARSUPIALIZATN SALIVARY GL CYST
	2629	OTH EXCIS SALIVARY GLAND LESION
	2699	OTH OPERAT SALIVARY GLAND/DUCT

ACCS Intervention Cell

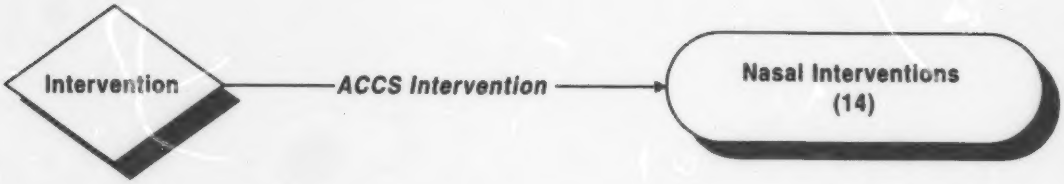

Intervention
ACCS Intervention
Tonsils and Adenoids (13-13.2)
Age?
18+ years
Tonsils & Adenoids (13)
0 < 6 years
Tonsils & Adenoids (13.1)
6 < 18 years
Tonsils & Adenoids (13.2)

ACCS Grouper
04/00

ACCS CELL
13-13.4 Tonsils and Adenoids

ACCS Cell	ICD-9-CM Code	ICD-9-CM Description
13-13.4 TONSILS & ADENOIDS	270	DRAINAGE OF FACE/FLOOR OF MOUTH
	280	INCIS/DRAIN TONSIL/PERITONSIL
	2811	BIOPSY OF TONSILS AND ADENOIDS
	282	TONSILLECTOMY NO ADENOIDECTOMY
	283	TONSILLECTOMY W ADENOIDECTOMY
	284	EXCISION OF TONSIL TAG
	285	EXCISION OF LINGUAL TONSIL
	286	ADENOIDECTOMY NO TONSILLECTOMY
	287	CONTR HEM AFT TONSIL/ADENOIDECT
	2892	EXCISION LESION TONSIL/ADENOID
	2899	OTH OPERATIONS TONSILS/ADENOIDS

ACCS Intervention Cell

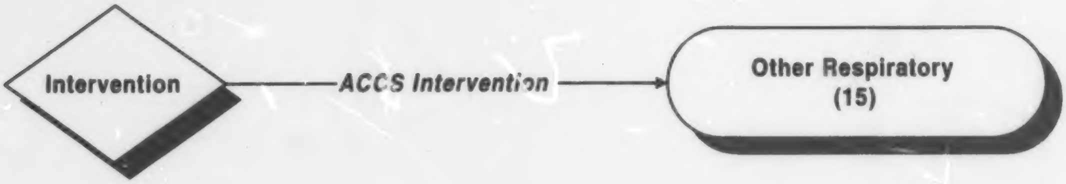


ACCS Grouper
09/98

ACCS CELL
14 Nasal Interventions

ACCS Cell	ICD-9-CM Code	ICD-9-CM Description
14 NASAL INTERVENTIONS	2100	CONTROL OF EPISTAXIS NOS
	2101	CONTR EPISTAXIS ANT NASAL PACK
	2102	CONTR EPISTAXIS POST NASAL PACK
	2103	CONTROL EPISTAXIS CAUTERIZATION
	2109	OTHER CONTROL OF EPISTAXIS
	2122	BIOPSY OF NOSE
	2130	EXCISN/DESTRUCT LESION NOSE NOS
	2132	LOCAL EXCIS/DESTR OTH LES NOSE
	214	RESECTION OF NOSE
	215	SUBMUCOUS RESECT NASAL SEPTUM
	2169	OTHER TURBINECTOMY
	2171	CLOSED REDUCTION NASAL FRACTURE
	2172	OPEN REDUCTION NASAL FRACTURE
	2182	CLOSURE OF NASAL FISTULA
	2183	TOTAL NASAL RECONSTRUCTION
	2184	REVISION RHINOPLASTY
	2185	AUGMENTATION RHINOPLASTY
	2186	LIMITED RHINOPLASTY
	2187	OTHER RHINOPLASTY
	2188	OTHER SEPTOPLASTY
	2189	OTH REPAIR/PLASTIC OPERAT NOSE
	2191	LYSIS OF ADHESIONS OF NOSE
	2199	OTHER OPERATIONS ON NOSE
	2200	ASPIRATN/LAVAGE NASAL SINUS NOS
	2201	PUNCT NASAL SINUS ASPIR/LAVAGE
	2202	ASPIR/LAV NAS SINUS THRU OSTIUM
	222	INTRANASAL ANTROTOMY
	9653	IRRIGATION OF NASAL PASSAGES
	9732	REMOVAL OF NASAL PACKING
	9812	REMOV INTRALUM FB NOSE NO INCIS

ACCS Intervention Cell

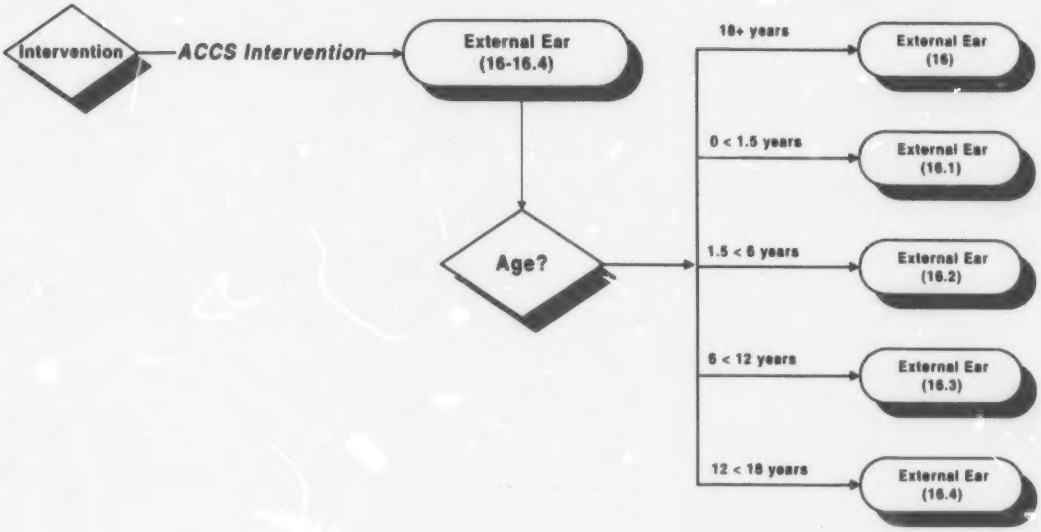


ACCS Grouper
09/98

ACCS CELL
15 Other Respiratory

ACCS Cell	ICD-9-CM Code	ICD-9-CM Description
15 OTHER RESPIRATORY	290	PHARYNGOTOMY
	2939	OTH EXC/DEST LES OR TIS PHARYNX
	2954	LYSIS OF PHARYNGEAL ADHESIONS
	2991	DILATION OF PHARYNX
	2999	OTHER OPERATIONS ON PHARYNX
	3129	OTHER PERMANENT TRACHEOSTOMY
	3172	CLOS EXTERNAL FISTULA TRACHEA
	3174	REVISION OF TRACHEOSTOMY
	3175	RECON TRACH/CONSTR ARTIF LARYNX
	3179	OTHER REPAIR/PLASTIC OP TRACHEA
	3198	OTHER OPERATIONS ON LARYNX
	3199	OTHER OPERATIONS ON TRACHEA
	344	EXCIS/DESTR LESION CHEST WALL
	3479	OTHER REPAIR OF CHEST WALL
	9723	REPLACEMENT TRACHEOSTOMY TUBE

ACCS Intervention Cell

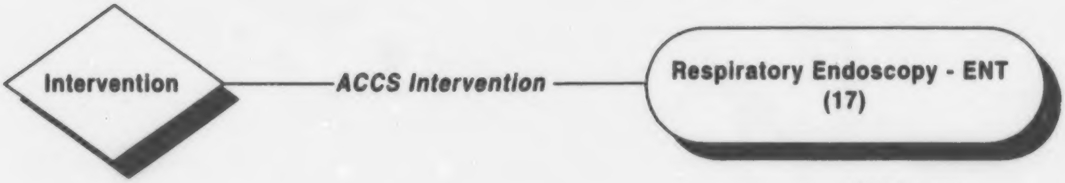

Intervention
ACCS Intervention
External Ear (16-16.4)
Age?
18+ years
External Ear (16)
0 < 1.5 years
External Ear (16.1)
1.5 < 6 years
External Ear (16.2)
6 < 12 years
External Ear (16.3)
12 < 18 years
External Ear (16.4)

ACCS Grouper
04/00

ACCS CELL
16-16.4 External Ear

ACCS Cell	ICD-9-CM Code	ICD-9-CM Description
16-16.4 EXTERNAL EAR	2001	MYRINGOTOMY WITH INSERTION TUBE
	2009	OTHER MYRINGOTOMY
	201	REMOVAL OF TYMPANOSTOMY TUBE
	2039	OTHER DX PROC MIDDLE/INNER EAR
	2079	OTH INCIS/EXCIS/DESTR INNER EAR
	208	OPERATIONS ON EUSTACHIAN TUBE
	9811	REMOV INTRALUM FB EAR NO INCIS

ACCS Intervention Cell

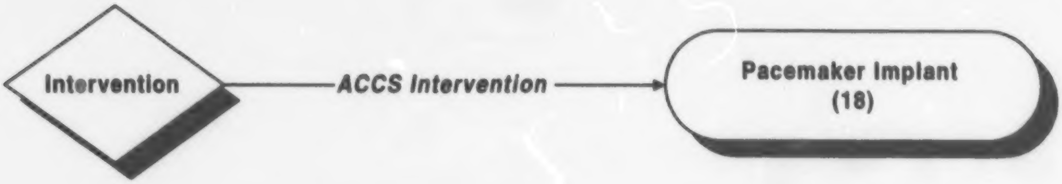


ACCS Grouper
04/00

ACCS CELL
17 Respiratory Endoscopy - ENT

ACCS Cell	ICD-9-CM Code	ICD-9-CM Description
17 RESPIRATORY ENDOSCOPY - ENT	2121	RHINOSCOPY
	2911	PHARYNGOSCOPY
	2912	PHARYNGEAL BIOPSY
	3009	OTH EXCIS/DESTR LES/TISS LARYNX
	3022	VOCAL CORDECTOMY
	3029	OTHER PARTIAL LARYNGECTOMY
	310	INJECTION OF LARYNX
	3141	TRACHEOSCOPY THRU ARTIFIC STOMA
	3142	LARYNGOSCOPY/OTHER TRACHEOSCOPY
	3143	CLOSED BIOPSY OF LARYNX
	3144	CLOSED BIOPSY OF TRACHEA
	3145	OPEN BIOPSY OF LARYNX/TRACHEA
	3169	OTHER REPAIR OF LARYNX
	3192	LYSIS ADHESIONS TRACHEA/LARYNX
	3193	REPLAC LARYNGEAL/TRACHEAL STENT
	3195	TRACHEOESOPHAGEAL FISTULIZATION
	3201	ENDO EXCIS/DESTR LES/TIS BRONCH
	3209	OTH LOC EXCIS/DESTR LES BRONCH
	3228	ENDO EXCIS/DESTR LES/TISS LUNG
	3321	BRONCHOSCOPY THRU ARTIFIC STOMA
	3322	FIBEROPTIC BRONCHOSCOPY
	3323	OTHER BRONCHOSCOPY
	3324	CLOSED ENDOSCOPIC BRONCHIAL BX
	3325	OPEN BIOPSY OF BRONCHUS
	3327	CLOSED ENDOSCOPIC BIOPSY LUNG
	3328	OPEN BIOPSY OF LUNG
	3329	OTHER DX PROCEDURES LUNG/BRONCH
	3393	PUNCTURE OF LUNG
	341	INCISION OF MEDIASTINUM
	3421	TRANSPLEURAL THORACOSCOPY
	3422	MEDIASTINOSCOPY
	3425	CLOSED BIOPSY OF MEDIASTINUM
	3426	OPEN MEDIASTINAL BIOPSY
	9656	OTHER LAVAGE BRONCHUS/TRACHEA
	9813	REMOV INTRALUM FB PHAR NO INCIS
	9815	REMOV INTR FB TRACH/BRON NO INC

ACCS Intervention Cell

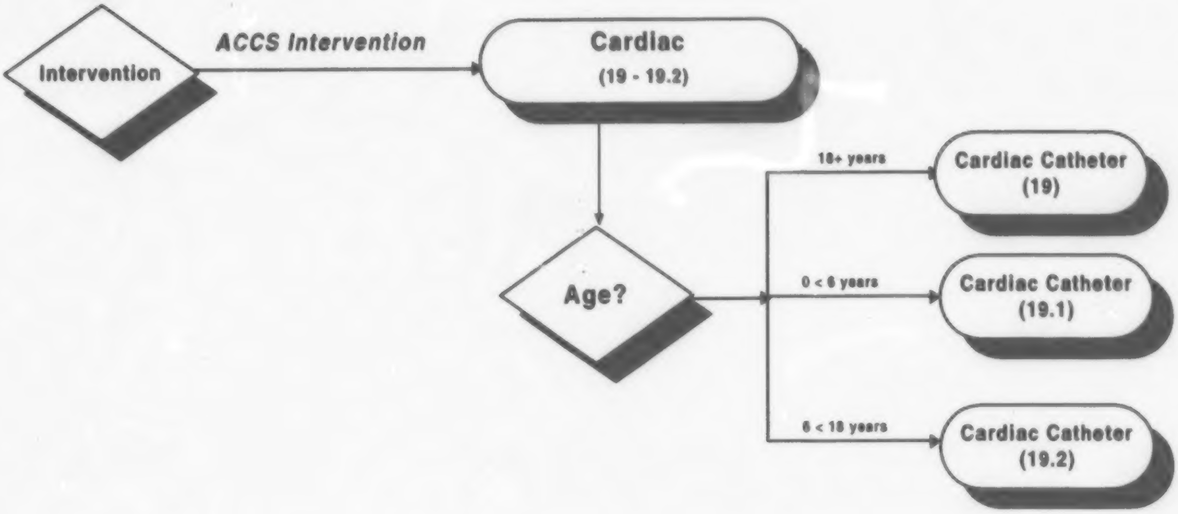


ACCS Grouper
09/98

ACCS CELL
18 Pacemaker Implant

ACCS Cell	ICD-9-CM Code	ICD-9-CM Description
18 PACEMAKER IMPLANT	3770	INIT INSERT PACEMAKER LEAD NOS
	3778	INSERT TEMP TRANSVEN PACEMAKER
	3779	REVIS/RELOCAT PACEMAKER POCKET
	3780	INSERT PERM PACEMAKER TYPE NOS
	3781	INIT INSRT SING-CHAMB DEV NOS
	3782	INIT INSRT SING-CHAMB/RATE RESP
	3783	INIT INSERT DUAL-CHAMBER DEVICE
	3785	REPLAC PACMKR W SING-CHAMB NOS
	3786	REPL PACMKR SING-CHAM/RATE RESP
	3787	REPLAC PACMKR W DUAL-CHAMB DEV
	3789	REVISN/REMOVAL PACEMAKER DEVICE
	3796	IMPL AUTO CARDIOVERT/DEFIB GENR
	3798	REPL AUTO CARDIOVERT/DEFIB GENR

ACCS Intervention Cell

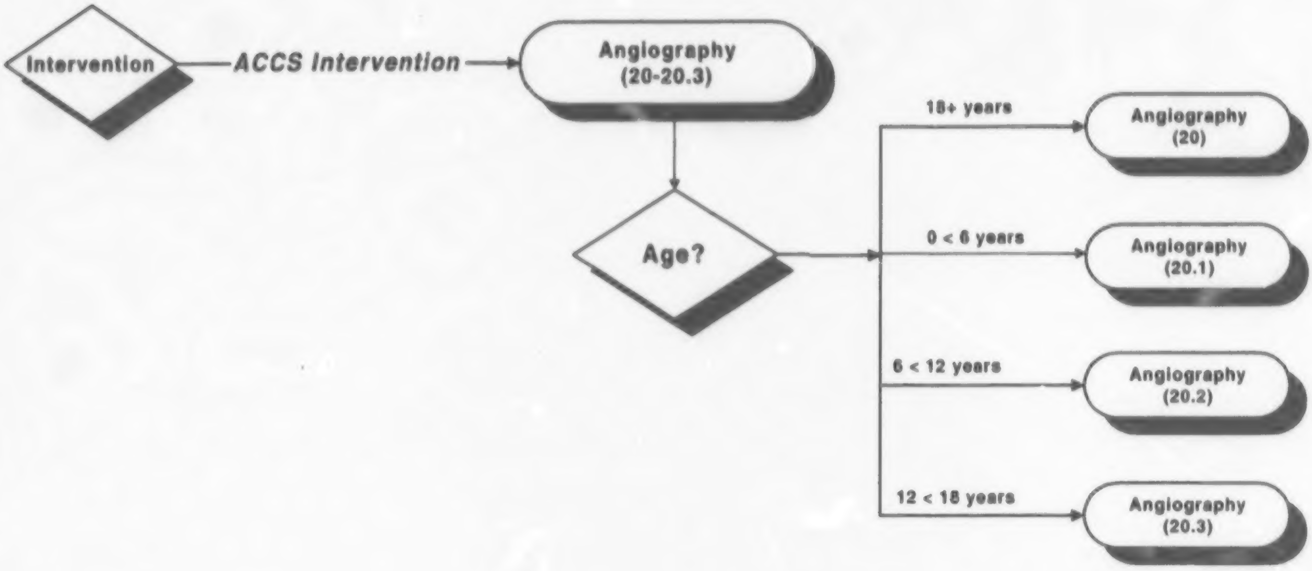

Intervention
ACCS Intervention
Cardiac
(19 - 19.2)
Age?
18+ years
Cardiac Catheter
(19)
0 < 6 years
Cardiac Catheter
(19.1)
6 < 18 years
Cardiac Catheter
(19.2)

ACCS Grouper
04/00

ACCS CELL
19-19.4 Cardiac Catheter

ACCS Cell	ICD-9-CM Code	ICD-9-CM Description
19-19.2 CARDIAC CATHETER	3596	PERCUTANEOUS VALVULOPLASTY
	3601	SINGLE PTCA NO THROMBOLYT AG
	3602	SINGLE PTCA W THROMBOLYT AGENT
	3605	MULT VESS PTCA SAME OP EPISODE
	3721	R HEART CARDIAC CATHETERIZATION
	3722	L HEART CARDIAC CATHETERIZATION
	3723	COMBIN R/L CARD CATHETERIZATION
	3734	CATHETER ABLATION LESION/TISSUE CHEST WALL
	3725	BIOPSY OF HEART
	3771	INIT INSERT TRANSVEN LEAD VENT
	3772	INIT INSRT TRANSV LEAD ATR/VENT
	3773	INIT INSRT TRANSVEN LEAD ATRIUM
	3774	INSRT/REPL EPICARD LEAD EPICARD
	3775	REVISION OF LEAD
	3776	REPLAC TRANSVEN ATR/VENT LEADS
	3777	REMOVAL LEAD(S) WITHOUT REPLACE
	3795	IMPL AUTO CARDIOVERT/DEFIB LEAD
	3797	REPL AUTO CARDIOVERT/DEFIB LEAD
	3802	INCISION OTH VESSELS HEAD/NECK
	3805	INCISION OTHER THORACIC VESSELS
	8606	INSERT TOT IMPLANT INFUSN PUMP
	8607	INSERT TOT IMPL VASC ACCESS DEV
	8853	ANGIOCARDIOGRAPH L HEART STRUCT
	8854	COMBIN R/L HRT ANGIOCARDIOGRAPH
	8855	CORONARY ARTERIOGRAPH SING CATH
	8856	CORONARY ARTERIOGRAPHY TWO CATH
	8857	OTH/NOS CORONARY ARTERIOGRAPHY
	8858	NEGATIVE CONTR CARDIAC ROENTGEN

ACCS Intervention Cell

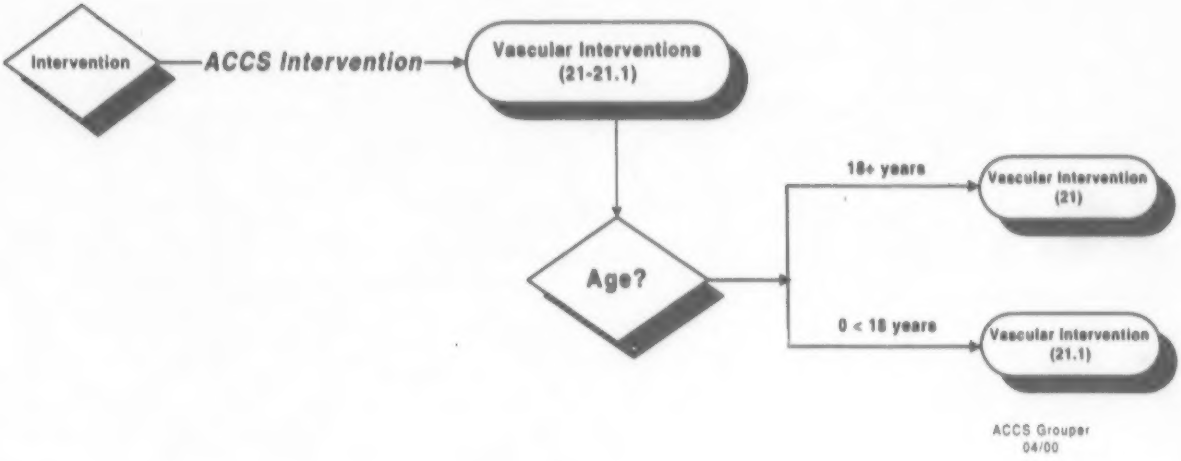

Intervention
ACCS Intervention
Angiography (20-20.3)
Age?
18+ years
Angiography (20)
0 < 6 years
Angiography (20.1)
6 < 12 years
Angiography (20.2)
12 < 18 years
Angiography (20.3)

ACCS Grouper
04/00

ACCS CELL
20-20.4 Angiography

ACCS Cell	ICD-9-CM Code	ICD-9-CM Description
20-20.3 ANGIOGRAPHY	3726	CARDIAC ELECTROPHYS STIM STUDY
	3727	CARDIAC MAPPING
	3729	OTHER DX PROC HEART/PERICARDIUM
	8794	CONTRAST VASOGRAM
	8840	ARTERIOGRAPHY W CONTR SITE NOS
	8841	ARTERIOGRAPHY CEREBRAL ARTERIES
	8842	AORTOGRAPHY
	8843	ARTERIOGRAPH PULMONARY ARTERIES
	8844	ARTERIOGRAPH OTH INTRATHOR VESS
	8845	ARTERIOGRAPHY OF RENAL ARTERIES
	8847	ARTERIOGRAPHY OTH INTRAABD ART
	8848	ARTERIOGRAPH FEM/LOW EXTREM ART
	8849	ARTERIOGRAPHY OTHER SPEC SITES
	8850	ANGIOCARDIOGRAPHY NOS
	8851	ANGIOCARDIOGRAPHY VENAE CAVAE
	8852	ANGIOCARDIOGRAPH R HEART STRUCT

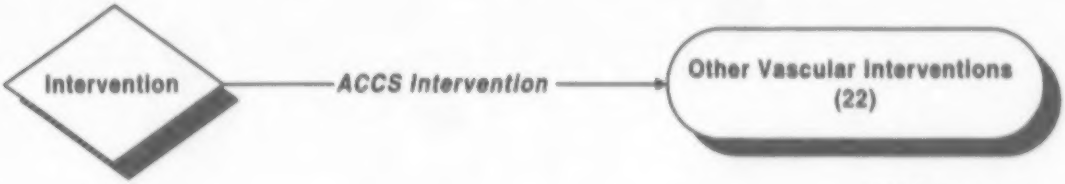
ACCS Intervention Cell


Intervention
ACCS Intervention
Vascular Interventions (21-21.1)
Age?
18+ years
Vascular Intervention (21)
0 < 18 years
Vascular Intervention (21.1)
ACCS Grouper 04/00

ACCS CELL
21-21.1 Vascular Interventions

ACCS Cell	ICD-9-CM Code	ICD-9-CM Description
21-21.1 VASCULAR INTERVENTIONS	3891	ARTERIAL CATHETERIZATION
	3893	VENOUS CATHETERIZATION NEC
	3895	VENOUS CATH FOR RENAL DIALYSIS
	3927	ARTERIOVENOSTOMY RENAL DIALYSIS
	3942	REVIS ARTERIOVEN SHUNT-DIALYSIS
	3943	REMOV ARTERIOVEN SHUNT-DIALYSIS
	3949	OTH REVISION VASCULAR PROCEDURE
	3950	ANGIOPL/ATHERECT NON-COR VESSEL
	3951	CLIPPING OF ANEURYSM
	3952	OTHER REPAIR OF ANEURYSM
	3953	REPAIR OF ARTERIOVENOUS FISTULA
	3958	REPR BLOOD VESS W PATCH GRF NOS
	3959	OTHER REPAIR OF VESSEL
	3993	INSERT VESSEL-TO-VESSEL CANNULA
	3994	REPLAC VESSEL-TO-VESSEL CANNULA

ACCS Intervention Cell

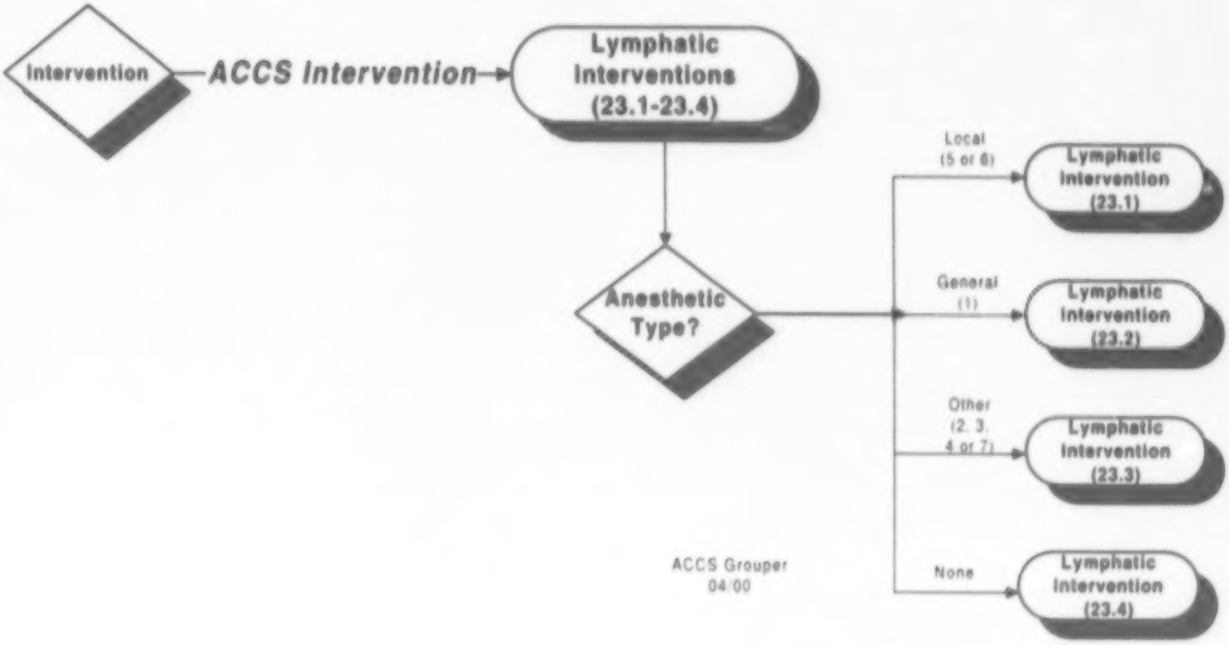


ACCS Grouper
09/98

ACCS CELL
22 Other Vascular Interventions

ACCS Cell	ICD-9-CM Code	ICD-9-CM Description
22 OTHER VASCULAR INTERVENTIONS	3803	INCISION UPPER LIMB VESSELS
	3808	INCISION LOWER LIMB ARTERIES
	3809	INCISION LOWER LIMB VEINS
	3822	PERCUTANEOUS ANGIOSCOPY
	3833	RESECT UPPER LIMB VESS W ANAST
	3838	RESECT LOWER LIMB ART W ANAST
	3839	RESECT LOWER LIMB VEIN W ANAST
	3843	RESECT UPP LIMB VESS W REPLACE
	3850	LIG/STRIP VARIC VEIN SITE NOS
	3852	LIG/STRIP HEAD/NECK VARIC VEIN
	3859	LIG/STRIP LOWER LIMB VARIC VEIN
	3860	OTH EXCISION VESSEL UNSPEC SITE
	3862	OTH EXCISION OTH VESS HEAD/NECK
	3863	OTH EXCISION UPPER LIMB VESSELS
	3868	OTH EXCISION LOW LIMB ARTERIES
	3869	OTHER EXCISION LOWER LIMB VEINS
	3880	OTH SURG OCCLUS VESSEL SITE NOS
	3882	OTH SURG OCCLUS OTH HD/NECK VES
	3883	OTH SURG OCCLUS UPPER LIMB VESS
	3887	OTH SURG OCCLUS ABDOMINAL VEINS
	3888	OTH SURG OCCLUS LOWER LIMB ART
	3889	OTH SURG OCCLUS LOWER LIMB VEIN
	3898	OTHER PUNCTURE OF ARTERY
	3931	SUTURE OF ARTERY

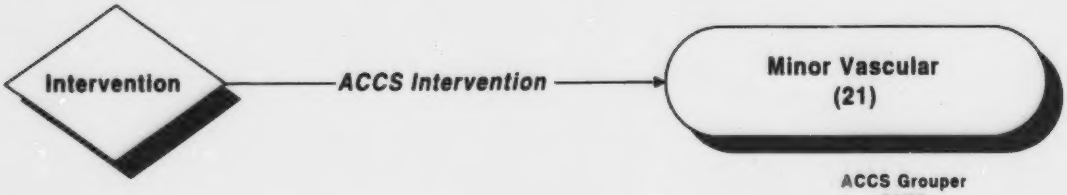
ACCS Intervention Cell


Intervention
ACCS Intervention
Lymphatic Interventions (23.1-23.4)
Anesthetic Type?
Local (5 or 6)
Lymphatic Intervention (23.1)
General (1)
Lymphatic Intervention (23.2)
Other (2, 3, 4 or 7)
Lymphatic Intervention (23.3)
None
Lymphatic Intervention (23.4)
ACCS Grouper 04/00

ACCS CELL
23.1-23.3 Lymphatic Interventions

ACCS Cell	ICD-9-CM Code	ICD-9-CM Description
23.1-23.4 LYMPHATIC INTERVENTIONS	3821	BIOPSY OF BLOOD VESSEL
	400	INCISION LYMPHATIC STRUCTURES
	4011	BIOPSY OF LYMPHATIC STRUCTURE
	4019	OTH DX PROC LYMPHATIC STRUCTURE
	4021	EXCIS DEEP CERVICAL LYMPH NODE
	4022	EXCISION INT MAMMARY LYMPH NODE
	4023	EXCISION OF AXILLARY LYMPH NODE
	4024	EXCISION OF INGUINAL LYMPH NODE
	4029	SIMPLE EXCIS OTHER LYMPH STRUCT
	403	REGIONAL LYMPH NODE EXCISION
	4051	RAD EXCIS AXILLARY LYMPH NODES
	4059	RAD EXCISION OTHER LYMPH NODES
	409	OTH OPERATIONS LYMPH STRUCTURES

ACCS Intervention Cell



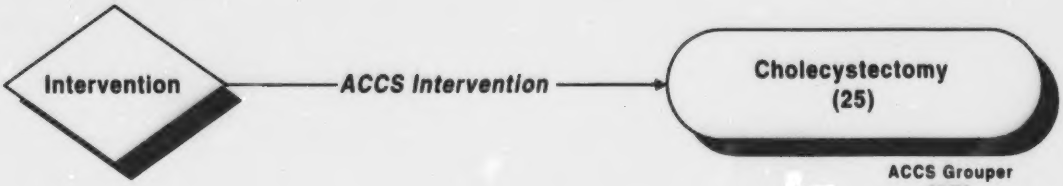
ACCS Grouper
04/00

ACCS CELL
24 Minor Vascular

ACCS Cell	ICD-9-CM Code	ICD-9-CM Description
24 MINOR VASCULAR	3800	INCISION OF VESSEL UNSPEC SITE
	3806	INCISION ABDOMINAL ARTERIES
	3829	OTH DX PROCEDURES BLOOD VESSELS
	3894	VENOUS CUTDOWN
	3932	SUTURE OF VEIN
	3992	INJECTION SCLEROSING AGENT VEIN
	3999	OTHER OPERATIONS ON VESSELS
	8860	PHLEBOGRAPHY W CONTR SITE NOS
	8861	PHLEBOGRAPHY HEAD/NECK W CONTR
	8862	PHLEBOGRAPHY PULMONARY W CONTR
	8863	PHLEBOGRAPHY OTH INTRATHOR/CONTR
	8864	PHLEBOGRAPHY PORTAL SYS W CONTR
	8865	PHLEBOGRAPHY OTH INTRAABD/CONTR
	8866	PHLEBOGRAPHY FEM/LOW EXTREM/CONT
	8867	PHLEBOGRAPHY OTH SPEC SITE/CONTR
	8868	IMPEDANCE PHLEBOGRAPHY

FU

ACCS Intervention Cell

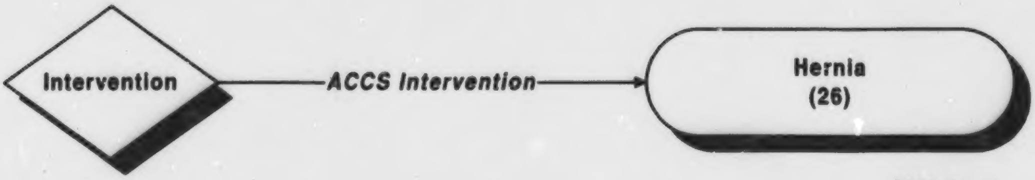

Intervention
ACCS Intervention
Cholecystectomy
(25)

ACCS Grouper
09/98

ACCS CELL
25 Cholecystectomy

ACCS Cell	ICD-9-CM Code	ICD-9-CM Description
25 CHOLECYSTECTOMY	5122	CHOLECYSTECTOMY
	5123	LAPAROSCOPIC CHOLECYSTECTOMY
	5149	INCIS OTH BILE DUCT-RELIEF OBST
	5151	EXPLORATION OF COMMON DUCT

ACCS intervention Cell

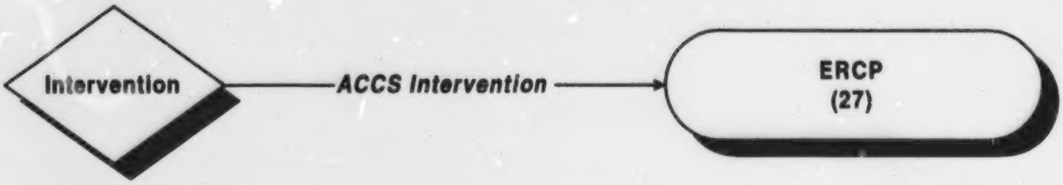


ACCS Grouper
09/98

ACCS CELL
26 Hernia

ACCS Cell	ICD-9-CM Code	ICD-9-CM Description
26 HERNIA	5300	UNILAT REPR INGUINAL HERNIA NOS
	5301	REPAIR DIRECT INGUINAL HERNIA
	5302	REPAIR INDIRECT INGUINAL HERNIA
	5303	REPR DIR ING HERNIA GRF/PROSTH
	5304	REPR INDIR ING HERNIA GRF/PROS
	5305	REPR ING HERNIA GRF/PROSTH NOS
	5310	BILAT REPR INGUINAL HERNIA NOS
	5311	BIL REPR DIRECT INGUINAL HERNIA
	5312	BIL REPR INDIR INGUINAL HERNIA
	5313	BIL REPAIR ING HERNIA DIR/INDIR
	5314	BIL REPR DIR ING HERNIA W GRF
	5315	BIL REPR INDIR ING HERNIA W GRF
	5316	BIL REPR ING HERNIA DIR/IND GRF
	5317	BILAT REPR ING HERNIA GRAFT NOS
	5321	UNILAT REPR FEM HERNIA GRF/PROS
	5329	OTH UNIL FEMORAL HERNIORRHAPHY
	5331	BIL REPR FEM HERNIA GRF/PROSTH
	5339	OTH BILAT FEMORAL HERNIORRHAPHY
	5341	REPAIR UMBILICAL HERNIA PROSTH
	5349	OTHER UMBILICAL HERNIORRHAPHY
	5351	INCISIONAL HERNIA REPAIR
	5359	REPR OTH HERNIA ANT ABDOM WALL
	5361	INCISION HERNIA REPAIR W PROSTH
	5369	REPR OTH HERNIA ABDOM W PROSTH
	539	OTHER HERNIA REPAIR

ACCS Intervention Cell

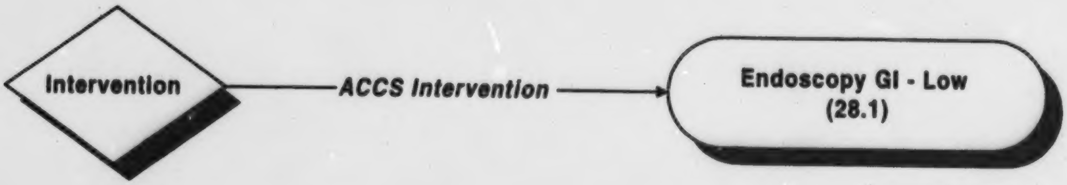


ACCS Grouper
09/98

ACCS CELL
27 ERCP

ACCS Cell	ICD-9-CM Code	ICD-9-CM Description
27 ERCP	5012	OPEN BIOPSY OF LIVER
	5110	ERCP
	5111	ENDO RETRO CHOLANGIOGRAPHY(ERC)
	5113	OP BIOPSY GALLBLADDER/BILE DUCT
	5114	OTH CL BIOPSY BIL/SPHINCT ODDI
	5115	PRESS MEASURE SPHINCTER OF ODDI
	5119	OTH DX PROCEDURES BILIARY TRACT
	5182	PANCREATIC SPHINCTEROTOMY
	5183	PANCREATIC SPHINCTEROPLASTY
	5184	ENDO DILAT AMPULLA/BILIARY DUCT
	5185	ENDO SPHINCTEROTOMY/PAPILLOTOMY
	5187	ENDO INSERT STENT IN BILE DUCT
	5188	ENDO REMOV STONE BILIARY TRACT
	5196	PERCUTAN EXTRC COMMON DCT STONE
	5198	OTH PERCUTAN PROC BILIARY TRACT
	5199	OTHER OPERATIONS BILIARY TRACT
	5209	OTHER PANCREATOTOMY
	5212	OPEN BIOPSY OF PANCREAS
	5213	ENDO RETROGRADE PANCREATOGRAPHY
	5214	CLOSED BIOPSY PANCREATIC DUCT
	5219	OTHER DX PROCEDURES ON PANCREAS
	5221	ENDO EXCIS/DESTR LES PANCR DUCT
	5292	CANNULATION OF PANCREATIC DUCT
	5293	ENDO INSERT STENT PANCREAT DUCT
	5294	ENDO REMOV STONE PANCREAT DUCT
	5298	ENDOSC DILATION PANCREATIC DUCT
	5299	OTHER OPERATIONS ON PANCREAS
	8766	CONTRAST PANCREATOGRAM
	9705	REPLACE STENT BIL/PANCREAT DUCT

ACCS Intervention Cell

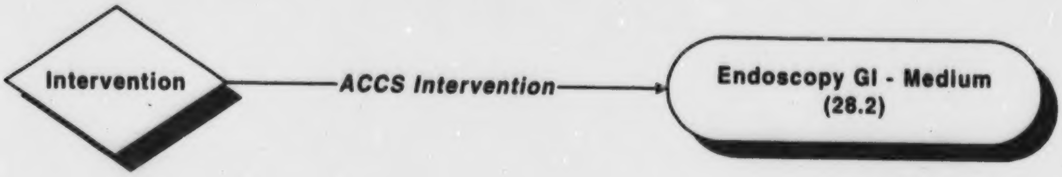

Intervention
ACCS Intervention
Endoscopy GI - Low
(28.1)

ACCS Grouper
09/98

ACCS CELL
28.1 Endoscopy GI - Low

ACCS Cell	ICD-9-CM Code	ICD-9-CM Description
28.1 ENDOSCOPY GI - LOW	4292	DILATION OF ESOPHAGUS
	4524	FLEXIBLE SIGMOIDOSCOPY
	9702	REPLACEMENT GASTROSTOMY TUBE
	9704	REPLACE TUBE/DEV LARGE INTEST

ACCS Intervention Cell



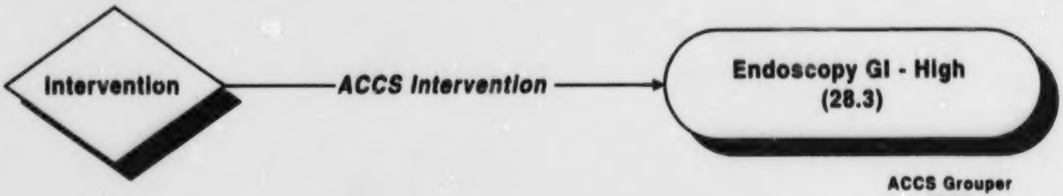
ACCS Grouper
09/98

ACCS CELL
28.2 Endoscopy GI - Medium

ACCS Cell	ICD-9-CM Code	ICD-9-CM Description
28.2 ENDOSCOPY GI - MEDIUM	4221	OPERATIVE ESOPHAGOSCOPY/INCIS
	4222	ESOPHAGOSCOPY THRU ARTIF STOMA
	4223	OTHER ESOPHAGOSCOPY
	4224	CLOSED BIOPSY OF ESOPHAGUS
	4225	OPEN BIOPSY OF ESOPHAGUS
	4229	OTHER DX PROCEDURES ESOPHAGUS
	4232	LOCAL EXCISN OTH LES/TISS ESOPH
	4239	OTH DESTRUCT LESION/TISS ESOPH
	4281	INSERT PERMANENT TUBE ESOPHAGUS
	4299	OTHER OPERATIONS ON ESOPHAGUS
	4319	OTHER GASTROSTOMY
	4341	ENDO EXCS/DESTR LES/TIS STOMACH
	4342	LOC EXCIS OTH LES/TISS STOMACH
	4412	GASTROSCOPY THRU ARTIFIC STOMA
	4413	OTHER GASTROSCOPY
	4414	CLOSED BIOPSY OF STOMACH
	4415	OPEN BIOPSY OF STOMACH
	4421	DILATION OF PYLORUS BY INCISION
	4422	ENDOSCOPIC DILATION OF PYLORUS
	4429	OTHER PYLOROPLASTY
	4443	ENDO CONTROL GASTRIC/DUOD BLEED
	4463	CLOSURE OTHER GASTRIC FISTULA
	4469	OTHER REPAIR OF STOMACH
	4499	OTHER OPERATIONS ON STOMACH
	4511	TRANSABD ENDOSCOPY SM INTESTINE
	4512	ENDOSCOPY SM INTEST THRU STOMA
	4513	OTHER ENDOSCOPY SMALL INTESTINE
	4514	CLOSED BIOPSY SMALL INTESTINE
	4515	OPEN BIOPSY OF SMALL INTESTINE
	4516	ESOPHAGOGASTRODUODENOSCOPY W BX
	4519	OTHER DX PROC SMALL INTESTINE
	4521	TRANSABD ENDOSCOPY LARGE INTEST
	4522	ENDOSC LARGE INTEST ARTIF STOMA
	4523	COLONOSCOPY
	4525	CLOSED BIOPSY LARGE INTESTINE
	4526	OPEN BIOPSY OF LARGE INTESTINE
	4527	OPEN INTEST BIOPSY SITE UNSPEC
	4530	ENDO EXCIS/DESTR LES DUODENUM
	4531	OTH LOC EXCISN LESION DUODENUM
	4532	OTH DESTRUCT LESION OF DUODENUM
	4533	LOC EXCS LES SM INTEST EXC DUOD

ACCS Cell	ICD-9-CM Code	ICD-9-CM Description
28.2 ENDOSCOPY GI - MEDIUM	4534	OTH DEST LES SM INTEST EXC DUOD
	4541	EXCISN LES/TISS LARGE INTESTINE
	4543	ENDOSC DESTR OTH LES LRG INTEST
	4549	OTH DESTRUCT LESION LRG INTEST
	4682	INTRAABD MANIP LARGE INTESTINE
	4685	DILATION OF INTESTINE
	540	INCISION OF ABDOMINAL WALL
	543	EXCIS/DESTR LES/TISS ABDOM WALL
	9604	INSERTION OF ENDOTRACHEAL TUBE
	9608	INSERT (NASO-)INTESTINAL TUBE
	9633	GASTRIC LAVAGE
	9635	GASTRIC GAVAGE
	966	ENTERAL INFUS CONC NUTRIT SUBST
	9802	REMOV INTRALUM FB ESOPH NO INC
	9803	REM INTR FB STOM/SM INT NO INC
	9814	REMOV INTRALUM FB LARYNX NO INC

ACCS Intervention Cell

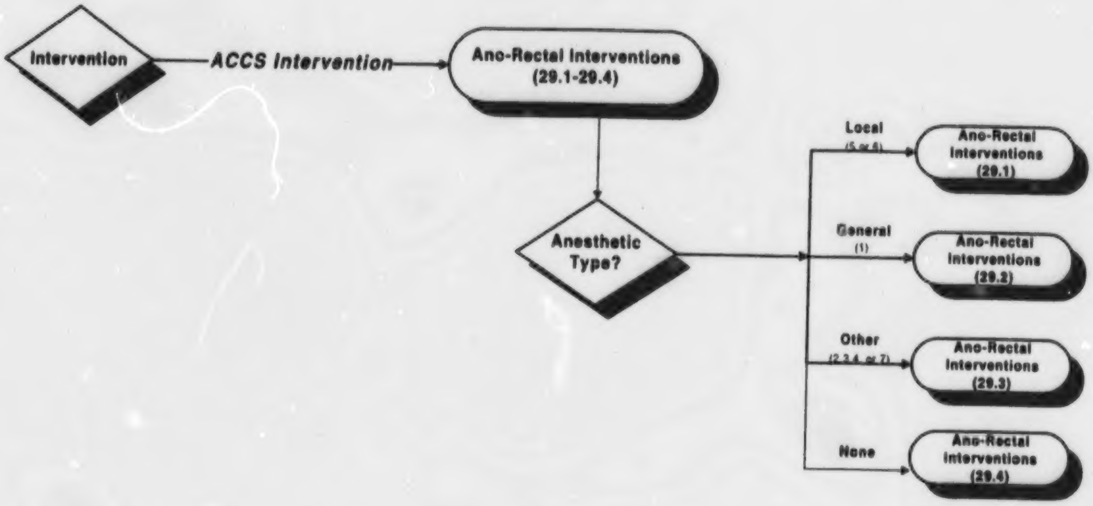

Intervention
ACCS Intervention
Endoscopy GI - High
(28.3)

ACCS Grouper
09/98

ACCS CELL
28.3 Endoscopy GI - High

ACCS Cell	ICD-9-CM Code	ICD-9-CM Description
28.3 ENDOSCOPY GI - HIGH	4233	ENDO EXC/DESTR LES/TISS ESOPH
	4291	LIGATION OF ESOPHAGEAL VARICES
	4311	PERCUTANEOUS GASTROSTOMY
	4542	ENDOSC POLYPECTOMY LARGE INTEST

ACCS Intervention Cell

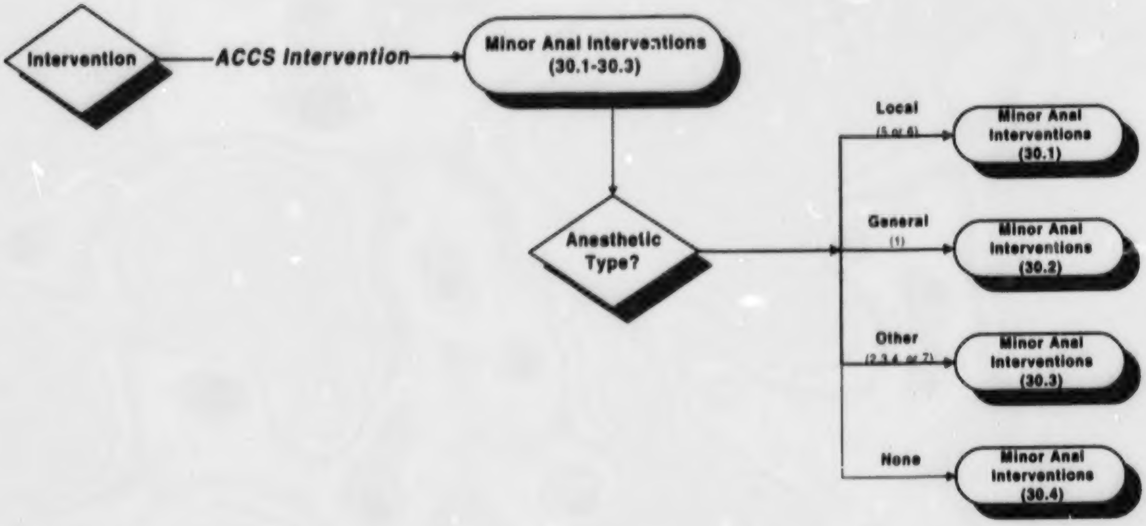

Intervention
ACCS Intervention
Ano-Rectal Interventions (29.1-29.4)
Anesthetic Type?
Local (5 or 6)
Ano-Rectal Interventions (29.1)
General (1)
Ano-Rectal Interventions (29.2)
Other (2,3,4, or 7)
Ano-Rectal Interventions (29.3)
None
Ano-Rectal Interventions (29.4)

ACCS Grouper
04/00

ACCS CELL
29.1-29.3 Ano-Rectal Interventions

ACCS Cell	ICD-9-CM Code	ICD-9-CM Description
29.1-29.4 ANO-RECTAL INTERVENTIONS	4640	REVISION INTESTINAL STOMA NOS
	4643	OTH REVIS STOMA LARGE INTESTINE
	4825	OPEN BIOPSY OF RECTUM
	4826	BIOPSY OF PERIRECTAL TISSUE
	4829	OTH DX PROC RECT/PERIRECT TISS
	4835	LOCAL EXCISION RECTAL LES/TISS
	4836	(ENDO) POLYPECTOMY OF RECTUM
	4861	TRANSSACRAL RECTOSIGMOIDECTOMY
	4869	OTHER RESECTION OF RECTUM
	4871	SUTURE OF LACERATION OF RECTUM
	4873	CLOSURE OF OTHER RECTAL FISTULA
	4876	OTHER PROCTOPEXY
	4879	OTHER REPAIR OF RECTUM
	4882	EXCISION OF PERIRECTAL TISSUE
	4893	REPAIR OF PERIRECTAL FISTULA
	4899	OTH OPERATIONS RECTUM/PERIRECT
	4904	OTHER EXCISION PERIANAL TISSUE
	4911	ANAL FISTULOTOMY
	4912	ANAL FISTULECTOMY
	4923	BIOPSY OF ANUS
	4929	OTH DX PROC ANUS/PERIANAL TISS
	4931	ENDOSC EXCS/DESTR LES/TISS ANUS
	4939	OTH LOC EXCS/DESTR LES/TIS ANUS
	4944	DESTR HEMORRHOID BY CRYOTHERAPY
	4945	LIGATION OF HEMORRHOIDS
	4946	EXCISION OF HEMORRHOIDS
	4951	LEFT LAT ANAL SPHINCTEROTOMY
	4952	POSTERIOR ANAL SPHINCTEROTOMY
	4959	OTHER ANAL SPHINCTEROTOMY
	496	EXCISION OF ANUS
	4971	SUTURE OF LACERATION OF ANUS
	4973	CLOSURE OF ANAL FISTULA
	4979	OTHER REPAIR OF ANAL SPHINCTER
	4992	INSERT SUBCU ELECTRIC ANAL STIM
	9622	DILATION OF RECTUM

ACCS Intervention Cell

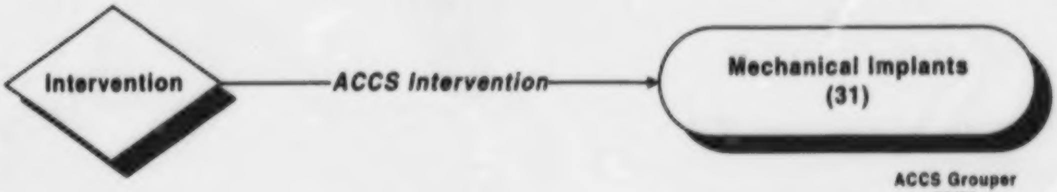

Intervention
ACCS Intervention
Minor Anal Interventions (30.1-30.3)
Anesthetic Type?
Local
(5 or 6)
Minor Anal Interventions (30.1)
General
(1)
Minor Anal Interventions (30.2)
Other
(2,3,4, or 7)
Minor Anal Interventions (30.3)
None
Minor Anal Interventions (30.4)

ACCS Grouper
04/00

ACCS CELL
30.1-30.3 Minor Anal Interventions

ACCS Cell	ICD-9-CM Code	ICD-9-CM Description
30.1-30.4 MINOR ANAL INTERVENTIONS	4699	OTHER OPERATIONS ON INTESTINES
	480	PROCTOTOMY
	4822	PROCTOSIGMOIDOSCOPY THRU STOMA
	4823	RIGID PROCTOSIGMOIDOSCOPY
	4824	CLOSED BIOPSY OF RECTUM
	4831	RAD ELECTROCOAG RECTAL LES/TISS
	4832	OTH ELECTROCOAG RECTAL LES/TISS
	4833	DESTRUCT RECTAL LES/TISS LASER
	4834	DESTRUCT RECT LES/TISS CRYOSURG
	4881	INCISION OF PERIRECTAL TISSUE
	4901	INCISION OF PERIANAL ABSCESS
	4902	OTHER INCISION PERIANAL TISSUE
	4903	EXCISION OF PERIANAL SKIN TAGS
	4921	ANOSCOPY
	4922	BIOPSY OF PERIANAL TISSUE
	4941	REDUCTION OF HEMORRHOIDS
	4942	INJECTION OF HEMORRHOIDS
	4943	CAUTERIZATION OF HEMORRHOIDS
	4947	EVACUAT THROMBOSED HEMORRHOIDS
	4949	OTHER PROCEDURES ON HEMORRHOIDS
	4972	ANAL CERCLAGE
	4993	OTHER INCISION OF ANUS
	4999	OTHER OPERATIONS ON ANUS
	9623	DILATION OF ANAL SPHINCTER
	9638	REMOVAL OF IMPACTED FECES
	9805	REMOV INTR FB RECT/ANUS NO INC

ACCS Intervention Cell

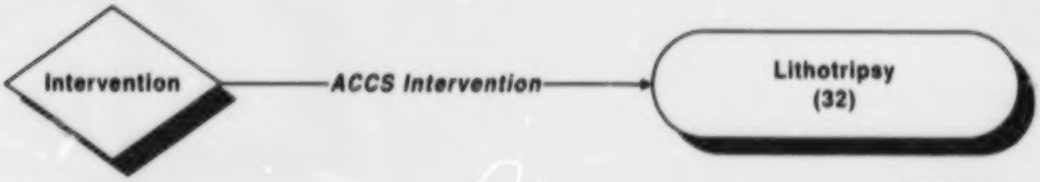

Intervention
ACCS Intervention
Mechanical Implants
(31)

ACCS Grouper
09/98

ACCS CELL
31 Mechanical Implants

ACCS Cell	ICD-9-CM Code	ICD-9-CM Description
31 MECHANICAL IMPLANTS	2095	IMPLANT ELECTROMAGNET HEAR AID
	2096	IMPL/REPLAC COCHLEAR PROSTH NOS
	2097	IMPL/REPLAC COCHL PROSTH SINGLE
	2098	IMPL/REPLAC COCHLEA PROSTH MULT
	5796	IMPLANTATION ELECT BLADDER STIM
	5893	IMPLANT ARTIFIC URINARY SPHINCT
	6495	INSRT/REPL NONINFLAT PENIS PROS
	6497	INSRT/REPL INFLAT PENILE PROSTH

ACCS Intervention Cell

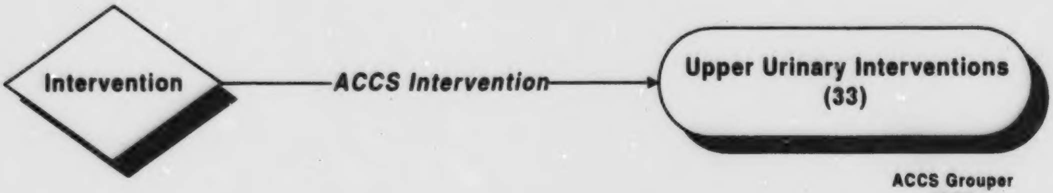

Intervention
ACCS Intervention
Lithotripsy
(32)

ACCS Grouper
09/98

ACCS CELL
32 Lithotripsy

ACCS Cell	ICD-9-CM Code	ICD-9-CM Description
32 LITHOTRIPSY	5995	ULTRASON FRAGMENT URINARY STONE
	9851	ESWL OF KIDNEY/URETER/BLADDER
	9852	ESWL OF GALLBLADDER/BILE DUCT
	9859	ESWL OF OTHER SITES

ACCS Intervention Cell

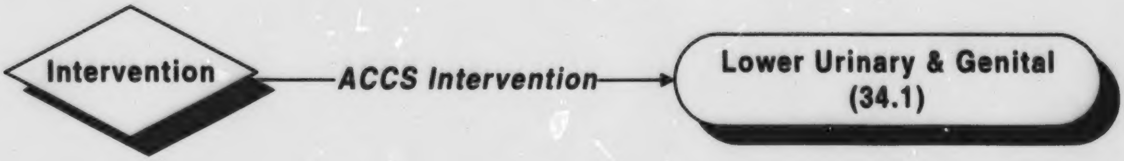


ACCS Grouper
09/98

ACCS CELL
33 Upper Urinary Interventions

ACCS Cell	ICD-9-CM Code	ICD-9-CM Description
33 UPPER URINARY INTERVENTIONS	5502	NEPHROSTOMY
	5503	PERCUTAN NEPHROST NO FRAGMENT
	5504	PERCUTAN NEPHROSTOMY W FRAGMENT
	5521	NEPHROSCOPY
	5539	OTH EXCIS/DESTR RENAL LES/TISS
	560	TRANSURETH REMOV OBST URET/PELV
	562	URETEROTOMY
	5631	URETEROSCOPY
	5633	CLOSED ENDOSCOPIC BIOPSY URETER
	5634	OPEN BIOPSY OF URETER
	5641	PARTIAL URETERECTOMY
	5689	OTHER REPAIR OF URETER
	5691	DILATION OF URETERAL MEATUS
	5699	OTHER OPERATIONS ON URETER
	5823	BIOPSY OF URETHRA
	5902	OTHER LYSIS PERIREN/PERIUR ADHES
	5903	LAPAROSCOPIC LYSIS OF PERIRENAL OR PERIURETERAL ADHESIONS
	5909	OTHER INCIS PERIREN/PERIURET TISS
	598	URETERAL CATHETERIZATION
	5999	OTHER OPERATIONS URINARY SYSTEM
	8923	URETHRAL SPHINCT ELECTROMYOGRAM

ACCS Intervention Cell



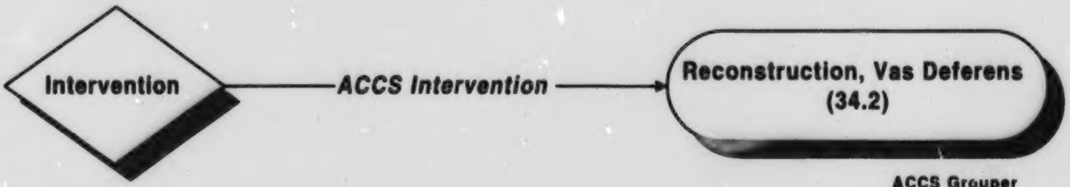
ACCS Grouper
04/00

ACCS CELL
34.1 Lower Urinary & Genital

ACCS Cell	ICD-9-CM Code	ICD-9-CM Description
34.1 LOWER URINARY & GENITAL	5501	NEPHROTOMY
	5662	REVISION OTH CUTAN URETEROSTOMY
	5722	REVISION/CLOSURE OF VESICOSTOMY
	5759	OPEN EXCIS/DESTR LES/TISS BLAD
	5782	CLOSURE OF CYSTOSTOMY
	5783	REPR FISTULA BLADDER/INTESTINE
	5784	REPAIR OTHER FISTULA OF BLADDER
	5785	CYSTOURETHROPLAST/REPR BLAD NCK
	5843	CLOSURE OTHER FISTULA URETHRA
	5845	REPAIR HYPOSPADIAS/EPISPADIAS
	5846	OTHER RECONSTRUCTION OF URETHRA
	5892	EXCISION OF PERIURETHRAL TISSUE
	595	RETROPUBIC URETHRAL SUSPENSION
	5971	LEVATOR MUSC OP URETHROVES SUSP
	5972	INJECT IMPLANT/URETH/BLADD NECK
	5979	OTH REPR URINARY STRESS INCONT
	6099	OTHER OPERATIONS ON PROSTATE
	610	INC/DRAIN SCROTUM/TUNICA VAGIN
	6111	BIOPSY SCROTUM/TUNICA VAGINALIS
	6141	SUTURE LACN SCROT/TUNICA VAGIN
	6142	REPAIR OF SCROTAL FISTULA
	6149	OTHER REPAIR SCROTUM/TUNICA VAG
	620	INCISION OF TESTES
	622	EXCIS/DESTRUCT TESTICULAR LES
	623	UNILATERAL ORCHIECTOMY
	6241	REMOVAL BOTH TESTES AT SAME OP
	6242	REMOVAL OF REMAINING TESTIS
	625	ORCHIOPEXY
	6269	OTHER REPAIR OF TESTES
	627	INSERTION TESTICULAR PROSTHESIS
	6299	OTHER OPERATIONS ON TESTES
	6352	REDUCTN TORSN TESTIS/SPERM CRD
	6383	EPIDIDYMOVASOSTOMY
	6389	OTHER REPAIR VAS DEFERENS/EPID
	6392	EPIDIDYMOTOMY

ACCS Cell	ICD-9-CM Code	ICD-9-CM Description
34.1 LOWER URINARY & GENITAL	6399	OTH OP SPERM CORD/EPID/VAS DEF
	6411	BIOPSY OF PENIS
	6419	OTHER DX PROCEDURES ON PENIS
	642	LOC EXCIS/DESTRUCT LESION PENIS
	6441	SUTURE OF LACERATION OF PENIS
	6442	RELEASE OF CHORDEE
	6449	OTHER REPAIR OF PENIS
	6492	INCISION OF PENIS
	6493	DIVISION OF PENILE ADHESIONS
	6496	REMOVAL INTERNAL PROSTH PENIS
	6498	OTHER OPERATIONS ON PENIS

ACCS Intervention Cell

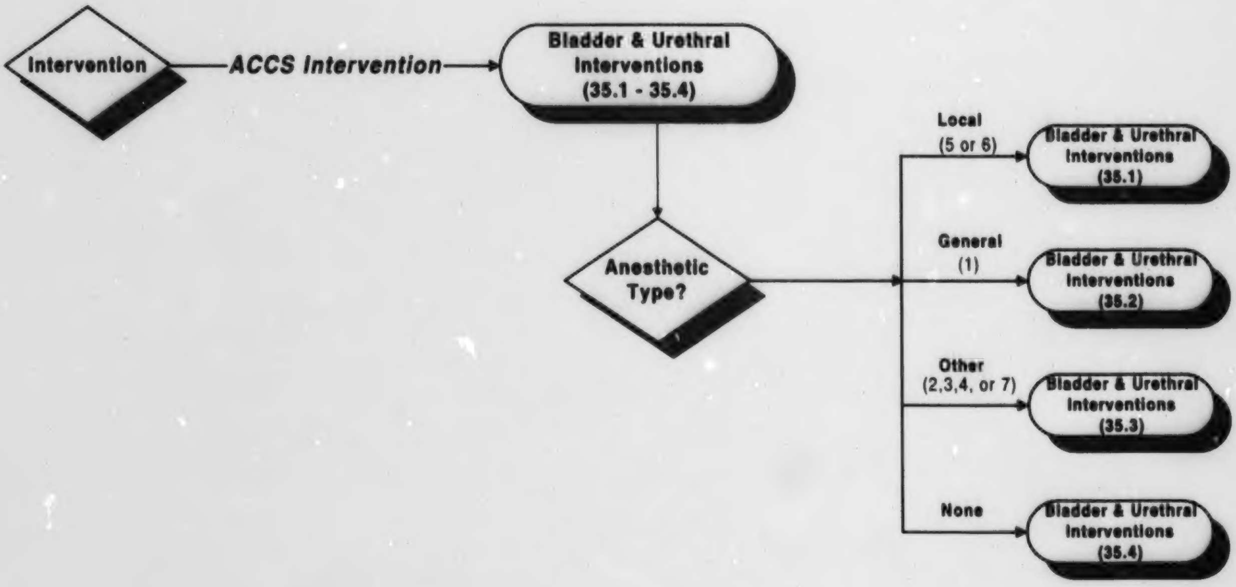


ACCS Grouper
09/98

ACCS CELL
34.2 Reconstruction, Vas Deferens

ACCS Cell	ICD-9-CM Code	ICD-9-CM Description
34.2 RECONSTRUCTION, VAS DEFERENS	6382	RECONSTRUCT DIVIDED VAS DEFEREN

ACCS Intervention Cell


Intervention
ACCS Intervention
Bladder & Urethral Interventions (35.1 - 35.4)
Anesthetic Type?
Local (5 or 6)
Bladder & Urethral Interventions (35.1)
General (1)
Bladder & Urethral Interventions (35.2)
Other (2,3,4, or 7)
Bladder & Urethral Interventions (35.3)
None
Bladder & Urethral Interventions (35.4)

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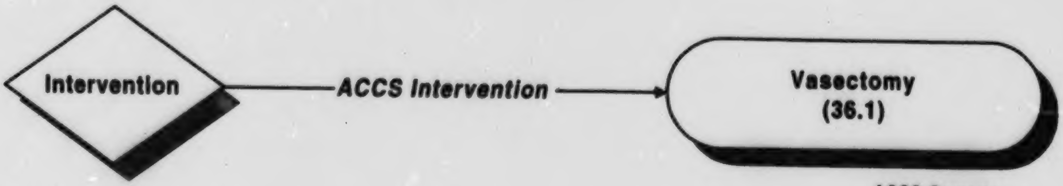
ACCS CELL
35.1-35.3 Bladder and Urethral Interventions

ACCS Cell	ICD-9-CM Code	ICD-9-CM Description
35.1-35.4 BLADDER & URETHRAL INTERVENTIONS	561	URETERAL MEATOTOMY
	5635	ENDOSCOPY OF ILEAL CONDUIT
	570	TRANSURETHRAL CLEARANCE BLADDER
	5711	PERCUTANEOUS ASPIRATION BLADDER
	5712	LYSIS INTRALUM ADHES/INCIS BLAD
	5717	PERCUTANEOUS CYSTOSTOMY
	5718	OTHER SUPRAPUBIC CYSTOSTOMY
	5719	OTHER CYSTOTOMY
	5721	VESICOSTOMY
	5731	CYSTOSCOPY THRU ARTIFIC STOMA
	5732	OTHER CYSTOSCOPY
	5733	CLOSED BIOPSY OF BLADDER
	5734	OPEN BIOPSY OF BLADDER
	5739	OTHER DX PROCEDURES ON BLADDER
	5749	OTH TRANSUR EXCS/DESTR LES BLAD
	5751	EXCISION OF URACHUS
	576	PARTIAL CYSTECTOMY
	5791	SPHINCTEROTOMY OF BLADDER
	5792	DILATION OF BLADDER NECK
	5793	CONTR POSTOP HEMORRHAGE BLADDER
	5799	OTHER OPERATIONS ON BLADDER
	580	URETHROTOMY
	581	URETHRAL MEATOTOMY
	5822	OTHER URETHROSCOPY
	5824	BIOPSY OF PERIURETHRAL TISSUE
	5831	ENDO EXCIS/DESTR LES/TISS URETH
	5839	OTH EXCIS/DESTR LES/TISS URETH
	5847	URETHRAL MEATOPLASTY
	5849	OTHER REPAIR OF URETHRA
	585	RELEASE OF URETHRAL STRICTURE
	586	DILATION OF URETHRA
	5891	INCISION OF PERIURETHRAL TISSUE
	5899	OTHER OP URETHRA/PERIURETH TISS
	600	INCISION OF PROSTATE
	6021	TRANSURETH LASER PROSTATECTOMY
	6029	OTH TRANSURETH PROSTATECTOMY
	6061	LOCAL EXCISION LESION PROSTATE
	6094	CONTROL(POSTOP)HEMORRHAGE PROST
	6095	TRANSURETH BALL DIL PROST URETH
	6499	OTH OPERAT MALE GENITAL ORGANS
	8774	RETROGRADE PYELOGRAM
	9625	THERAPEUTIC DISTENTION BLADDER
	9762	REMOV URETEROST TUBE/URET CATH
	9764	REMOVAL OTHER URINARY DRAIN DEV
	9819	REMOV INTRALUM FB URETH NO INC

ACCS Intervention Cell


Intervention
ACCS Intervention
Vasectomy
(36.1)

ACCS Grouper
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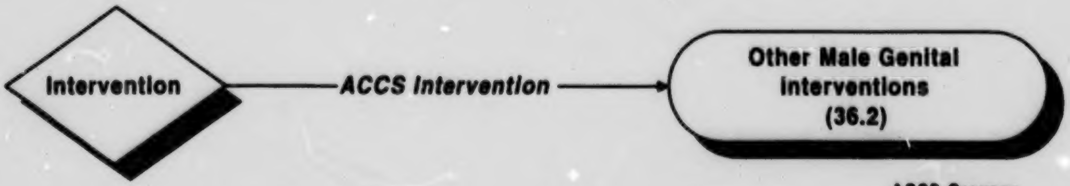
ACCS CELL
36.1 Vasectomy

ACCS Cell	ICD-9-CM Code	ICD-9-CM Description
36.1 VASECTOMY	6370	MALE STERILIZATION PROCEDURE
	6371	LIGATION OF VAS DEFERENS
	6372	LIGATION OF SPERMATIC CORD
	6373	VASECTOMY

ACCS Intervention Cell



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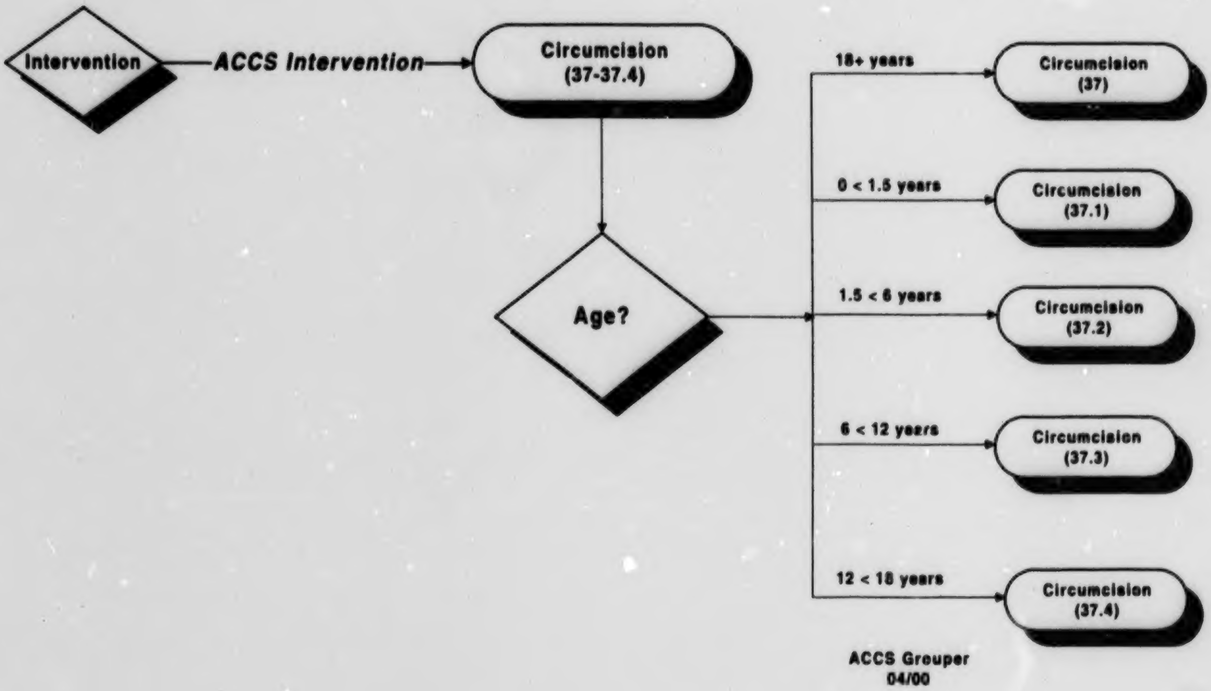
ACCS CELL
36.2 Other Male Genital Interventions

ACCS Cell	ICD-9-CM Code	ICD-9-CM Description
36.2 OTHER MALE GENITAL INTERVENTIONS	6072	INCISION OF SEMINAL VESICLE
	6073	EXCISION OF SEMINAL VESICLE
	612	EXCIS HYDROCELE (TUNICA VAGIN)
	613	EXCIS/DESTRUCT LES/TISS SCROTUM
	6199	OTH OP SCROTUM/TUNICA VAGINALIS
	6301	BIOPSY SPERM CORD/EPID/VAS DEF
	631	EXCIS VARICO/HYDROCEL SPERM CRD
	632	EXCISION OF CYST OF EPIDIDYMIS
	633	EXCIS OTH LES/TS SPERM CRD/EPID
	634	EPIDIDYMECTOMY
	6359	OTH REPAIR SPERMATIC CORD/EPID
	636	VASOTOMY
	6381	SUTURE LACN VAS DEF/EPIDIDYMIS
	6393	INCISION OF SPERMATIC CORD

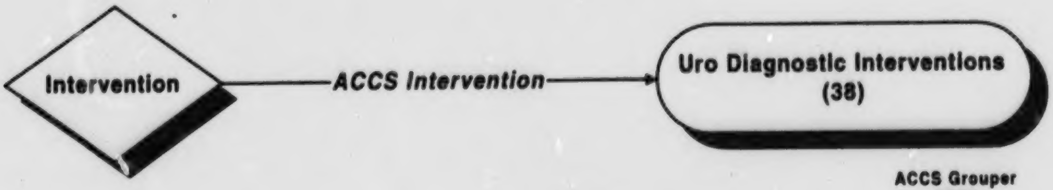
ACCS Intervention Cell


Intervention
ACCS Intervention
Circumcision (37-37.4)
Age?
18+ years
Circumcision (37)
0 < 1.5 years
Circumcision (37.1)
1.5 < 6 years
Circumcision (37.2)
6 < 12 years
Circumcision (37.3)
12 < 18 years
Circumcision (37.4)
ACCS Grouper
04/00

ACCS CELL
37-37.4 Circumcision

ACCS Cell	ICD-9-CM Code	ICD-9-CM Description
37-37.4 CIRCUMCISION	640	CIRCUMCISION
	6491	DORSAL OR LATERAL SLIT PREPUCE

ACCS Intervention Cell


Intervention
ACCS Intervention
Uro Diagnostic Interventions (38)

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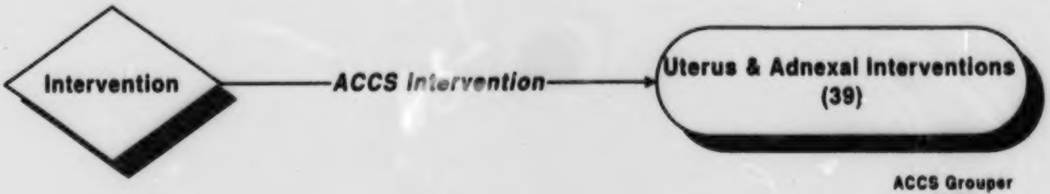
ACCS CELL
38 Uro Diagnostic Interventions

ACCS Cell	ICD-9-CM Code	ICD-9-CM Description
38 URO DIAGNOSTIC INTERVENTIONS	8921	URINARY MANOMETRY
	8922	CYSTOMETROGRAM
	8924	UROFLOWMETRY
	8925	URETHRAL PRESSURE PROFILE
	8929	OTH NONOP GU SYSTEM MEASUREMENT
	9649	OTH GENITOURINARY INSTILLATION

ACCS Intervention Cell



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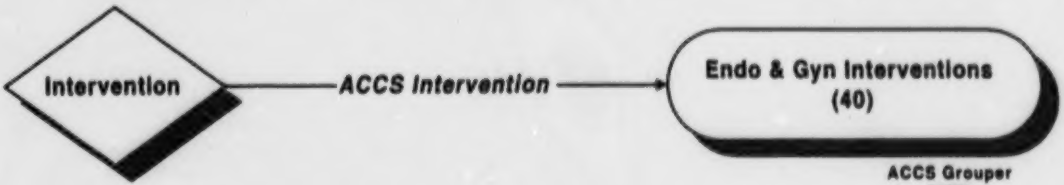
ACCS CELL
39 Uterus & Adnexal Interventions

ACCS Cell	ICD-9-CM Code	ICD-9-CM Description
39 UTERUS & ADNEXAL INTERVENTIONS	5411	EXPLORATORY LAPAROTOMY
	5412	REOPEN RECENT LAPAROTOMY SITE
	5419	OTHER LAPAROTOMY
	544	EXCIS/DESTRUCT PERITONEAL TISS
	5451	LAPAROSCOPIC LYISIS OF PERITONEAL ADHESIONS
	5459	OTHER LYSIS OF PERITONEAL ADHESIONS
	5472	OTHER REPAIR OF ABDOMINAL WALL
	5492	REMOVAL FB PERITONEAL CAVITY
	5493	CREAT CUTANEOPERITONEAL FISTULA
	5495	INCISION OF PERITONEUM
	5499	OTH OPERATIONS ABDOMINAL REGION
	6519	OTHER DX PROCEDURES ON OVARIES
	6521	MARSUPIALIZATION OVARIAN CYST
	6522	WEDGE RESECTION OF OVARY
	6523	LAPAROSCOPIC MARSUPIALIZATION OF OVARIAN CYST
	6524	LAPAROSCOPIC WEDGE RESECTION OF OVARY
	6525	OTHER LAPAROSCOPIC LOCAL EXCISION OR DESTRUCTION OF OVARY
	6529	OTH LOCAL EXCIS/DESTRUCT OVARY
	6531	LAPAROSCOPIC UNILATERAL OOPHORECTOMY
	6539	OTHER UNILATERAL OOPHORECTOMY
	6541	LAPAROSCOPIC UNILATERAL SALPINGO-OOPHORECTOMY
	6549	OTHER UNILATERAL SALPINGO-OOPHORECTOMY
	6551	REMOVAL BOTH OVARIES AT SAME OP
	6553	LAPAROSCOPIC REMOVAL OF BOTH OVARIES AT THE SAME OPERATIVE EPISODE
	6554	LAPAROSOPIC REMOVAL OF REMAINING OVARY
	6561	REMOV BOTH OVARY/TUBES SAME OP
	6562	REMOV REMAINING OVARY AND TUBE
	6563	LAPAROSCOPIC REMOVAL OF BOTH OVARIES AND TUBES AT SAME OPERATIVE EPISODE
	6564	LAPAROSCOPIC REMOVAL OF REMAINING OVARY AND TUBE
	6579	OTHER REPAIR OF OVARY
	6581	LAPAROSCOPIC LYSIS OF ADHESIONS OF OVARY AND FALLOPIAN TUBE
	6589	OTHER LYSIS OF OVARY AND FALLORIAN TUBE
	6595	RELEASE OF TORSION OF OVARY
	6599	OTHER OPERATIONS ON OVARY NEC
	6602	SALPINGOSTOMY
	6639	OTH BILAT DESTR/OCL FALLOPIAN

ACCS Cell	ICD-9-CM Code	ICD-9-CM Description
39 UTERUS & ADNEXAL INTERVENTIONS	664	TOTAL UNILATERAL SALPINGECTOMY
	6651	REMOV BOTH FALLOP TUBES SAME OP
	6661	EXCIS/DESTR LES FALLOPIAN TUBE
	6662	SALPINGECTOMY/REMOV TUBAL PREG
	6663	BILAT PARTIAL SALPINGECTOMY NOS
	6671	SIMPLE SUTURE OF FALLOPIAN TUBE
	6673	SALPINGO-SALPINGOSTOMY
	6679	OTHER REPAIR OF FALLOPIAN TUBE
	6692	UNILAT DESTR/OCCLUS FALLOP TUBE
	6694	REMOVAL PROSTHESIS FALLOP TUBE
	6699	OTHER OPERATION FALLOPIAN TUBES
	6822	INCIS/EXCIS CONGEN SEPT UTERUS
	6823	ENDOMETRIAL ABLATION
	6829	OTH EXCIS/DESTR LESION UTERUS
	683	SUBTOTAL ABDOMINAL HYSTERECTOMY
	684	TOTAL ABDOMINAL HYSTERECTOMY
	6851	LAPAROSCOPICALLY ASSISTED VAGINAL HYSTERECTOMY (LAVH)
	6859	OTHER VAGINAL HYSTERECTOMY
	689	OTHER & UNSPEC HYSTERECTOMY
	6919	OTH EXCIS/DESTR UTERUS/SUPPORTS
	6922	OTHER UTERINE SUSPENSION
	6929	OTHER REPAIR UTERUS/SUPP STRUCT
	693	PARACERVICAL UTERINE DENERVATN
	6949	OTHER REPAIR OF UTERUS
	6998	OTH OP SUPPORT STRUCTURE UTERUS
	7032	EXCIS/DESTRUCT LES CUL-DE-SAC
	704	OBLITERATION/TOTAL EXCIS VAGINA
	7050	REPAIR CYSTOCELE AND RECTOCELE
	7051	REPAIR OF CYSTOCELE
	7052	REPAIR OF RECTOCELE
	7072	REPAIR OF COLOVAGINAL FISTULA
	7073	REPAIR OF RECTOVAGINAL FISTULA
	7074	REPR OTH VAGINOENTERIC FISTULA
	7075	REPAIR OF OTHER FISTULA VAGINA
	708	OBLITERATION OF VAGINAL VAULT
	743	REMOVAL EXTRATUBAL ECTOPIC PREG

ACCS Intervention Cell



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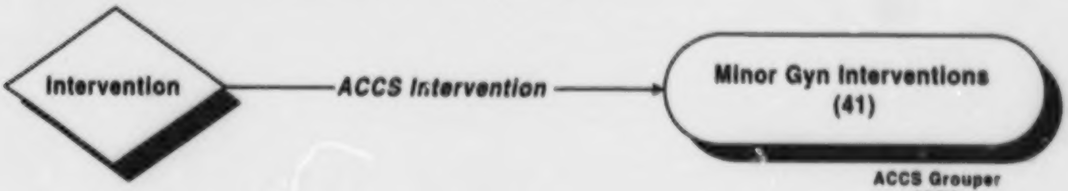
ACCS CELL
40 Endo & Gyn Interventions

ACCS Cell	ICD-9-CM Code	ICD-9-CM Description
40 ENDO & GYN INTERVENTIONS	5421	LAPAROSCOPY
	5423	BIOPSY OF PERITONEUM
	5424	CLOSED BIOPSY INTRAABDOM MASS
	5429	OTHER DX PROC ABDOMINAL REGION
	6501	LAPAROSCOPIC OOPHORECTOMY
	6509	OTHER OOPHORECTOMY
	6511	ASPIRATION BIOPSY OF OVARY
	6512	OTHER BIOPSY OF OVARY
	6513	LAPAROSCOPIC BIOPSY OF OVARY
	6514	OTHER LAPAROSCOPIC DIAGNOSTIC PROCEDURES ON OVARIES
	6591	ASPIRATION OF OVARY
	6601	SALPINGOTOMY
	6611	BIOPSY OF FALLOPIAN TUBE
	6619	OTHER DX PROC FALLOPIAN TUBES
	6621	BILAT ENDOSC LIGAT/CRUSH FALLOP
	6622	BILAT ENDOSC LIGAT/DIVIS FALLOP
	6629	OTH BILAT ENDO DESTR/OCL FALLOP
	6631	OTH BILAT LIGAT/CRUSH FALLOPIAN
	6632	OTH BILAT LIGAT/DIVIS FALLOPIAN
	668	INSUFFLATION OF FALLOPIAN TUBE
	6669	OTHER PARTIAL SALPINGECTOMY
	6691	ASPIRATION OF FALLOPIAN TUBE
	6812	HYSTEROSCOPY
	6813	OPEN UTERINE BIOPSY
	6814	OPEN BIOPSY UTERINE LIGAMENTS
	6815	CLOSED BIOPSY UTERINE LIGAMENTS
	6816	CLOSED BIOPSY OF UTERUS
	6819	OTHER DX PROC UTERUS/SUPPORTS
	6821	DIVISION ENDOMETRIAL SYNECHIAE
	700	CULDOCENTESIS
	7012	CULDOTOMY
	7022	CULDOSCOPY
	7023	BIOPSY OF CUL-DE-SAC

ACCS Intervention Cell



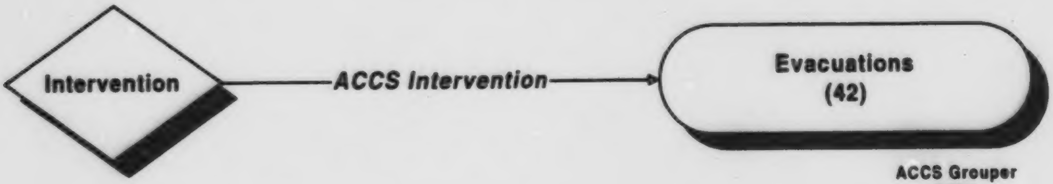
ACCS Grouper
09/98

ACCS CELL
41 Minor Gyn Interventions

ACCS Cell	ICD-9-CM Code	ICD-9-CM Description
41 MINOR GYN INTERVENTIONS	5422	BIOPSY ABDOMINAL WALL/UMBILICUS
	5461	RECLOS POSTOP DISRUPT ABD WALL
	670	DILATION OF CERVICAL CANAL
	6711	ENDOCERVICAL BIOPSY
	6712	OTHER CERVICAL BIOPSY
	6719	OTHER DX PROCEDURES ON CERVIX
	672	CONIZATION OF CERVIX
	6731	MARSUPIALIZATION CERVICAL CYST
	6732	DESTRUCT LES CERVIX CAUTERIZATN
	6733	DESTRUCT LES CERVIX CRYOSURGERY
	6739	OTH EXCIS/DESTR LES/TISS CERVIX
	674	AMPUTATION OF CERVIX
	675	REPAIR OF INTERNAL CERVICAL OS
	6761	SUTURE OF LACERATION OF CERVIX
	6769	OTHER REPAIR OF CERVIX
	6941	SUTURE OF LACERATION OF UTERUS
	697	INSERT INTRAUT CONTRACEPT DEV
	6993	INSERTION OF LAMINARIA
	6995	INCISION OF CERVIX
	6996	REMOV CERCLAGE MATERIAL CERVIX
	6999	OTHER OPERATIONS CERVIX/UTERUS
	7011	HYMENOTOMY
	7013	LYSIS INTRALUM ADHESIONS VAGINA
	7014	OTHER VAGINOTOMY
	7021	VAGINOSCOPY
	7024	VAGINAL BIOPSY
	7029	OTHER DX PROC VAGINA/CUL-DE-SAC
	7031	HYMENECTOMY
	7033	EXCISION/DESTRUCT LESION VAGINA
	7071	SUTURE OF LACERATION OF VAGINA
	7076	HYMENORRHAPHY
	7079	OTHER REPAIR OF VAGINA
	7091	OTHER OPERATIONS ON VAGINA
	7101	LYSIS OF VULVAR ADHESIONS
	7109	OTHER INCISION VULVA/PERINEUM
	7111	BIOPSY OF VULVA
	7119	OTHER DX PROCEDURES ON VULVA
	7121	PERCUTAN ASPIRAT BARTHOLIN'S GL
	7122	INCISION OF BARTHOLIN'S GLAND
41 MINOR GYN INTERVENTIONS	7123	MARSUPIALIZATION BARTHOLIN'S GL

ACCS Cell	ICD-9-CM Code	ICD-9-CM Description
	7124	EXCIS/OTH DESTR BARTHOLIN'S GL
	7129	OTH OPERATION BARTHOLIN'S GLAND
	713	OTH LOC EXCIS/DESTR VULVA/PERIN
	714	OPERATIONS ON CLITORIS
	7161	UNILATERAL VULVECTOMY
	7162	BILATERAL VULVECTOMY
	7171	SUTURE LACERATN VULVA/PERINEUM
	7172	REPAIR FISTULA VULVA/PERINEUM
	7179	OTHER REPAIR OF VULVA/PERINEUM
	718	OTHER OPERATIONS ON VULVA
	7569	REPAIR OTHER OBS LACERATION
	9614	VAGINAL PACKING
	9616	OTHER VAGINAL DILATION
	9618	INSERTION OTHER VAGINAL PESSARY
	9779	REMOVAL OTHER DEV GENITAL TRACT

ACCS Intervention Cell



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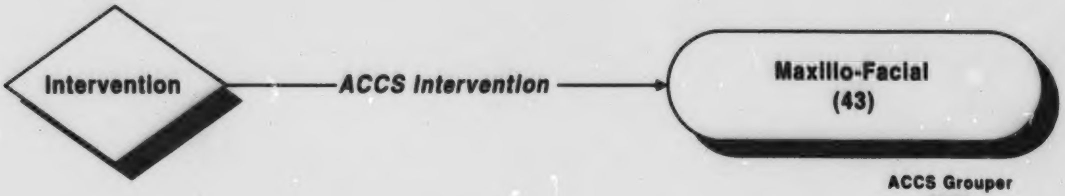
09/98

ACCS CELL
42 Evacuations

ACCS Cell	ICD-9-CM Code	ICD-9-CM Description
42 EVACUATIONS	6901	D & C FOR TERMINATION PREGNANCY
	6902	D & C FOLLOWING DELIVERY/ABORTN
	6909	OTHER DILATION AND CURETTAGE
	6951	ASPIRAT CURETT TERMINATION PREG
	6952	ASPIR CURETT FOLL DELIV/ABORTN
	6959	OTH ASPIRATION CURETTAGE UTERUS
	750	INTRAAMN INJECTION FOR ABORTION

ACCS Intervention Cell



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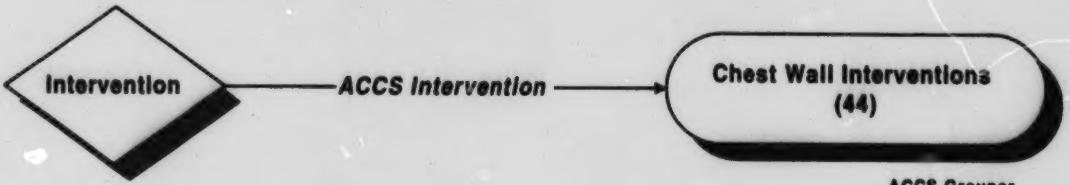
09/98

ACCS CELL
43 Maxillo-Facial

ACCS Cell	ICD-9-CM Code	ICD-9-CM Description
43 MAXILLO-FACIAL	7601	SEQUESTRECTOMY OF FACIAL BONE
	7609	OTHER INCISION OF FACIAL BONE
	7611	BIOPSY OF FACIAL BONE
	7619	OTH DX PROC FACIAL BONES/JOINTS
	762	LOC EXCIS/DESTR LES FACIAL BONE
	7639	PART OSTECTOMY OTH FACIAL BONE
	7646	OTH RECONSTRUCT OTH FACIAL BONE
	765	TEMPOROMANDIBULAR ARTHROPLASTY
	7661	CL OSTEOPLASTY MANDIBULAR RAMUS
	7662	OP OSTEOPLASTY MANDIBULAR RAMUS
	7663	OSTEOPLASTY OF BODY OF MANDIBLE
	7664	OTH ORTHOGNATHIC SURG MANDIBLE
	7665	SEGMENTAL OSTEOPLASTY MAXILLA
	7666	TOTAL OSTEOPLASTY OF MAXILLA
	7667	REDUCTION GENIOPLASTY
	7668	AUGMENTATION GENIOPLASTY
	7669	OTHER FACIAL BONE REPAIR
	7671	CL REDUCTN MALAR/ZYGOMAT FRACT
	7672	OP REDUCTN MALAR/ZYGOMAT FRACT
	7674	OP REDUCTION MAXILLARY FRACTURE
	7675	CL REDUCTN MANDIBULAR FRACTURE
	7676	OP REDUCTN MANDIBULAR FRACTURE
	7677	OP REDUCTION ALVEOLAR FRACTURE
	7678	OTH CL REDUCTN FACIAL FRACTURE
	7679	OTH OP REDUCTN FACIAL FRACTURE
	7691	BONE GRAFT TO FACIAL BONE
	7693	CL REDUCT TEMPOROMANDIB DISLOC
	7694	OP REDUCT TEMPOROMANDIB DISLOC
	7699	OTH OPERAT FACIAL BONES/JOINTS

ACCS Intervention Cell

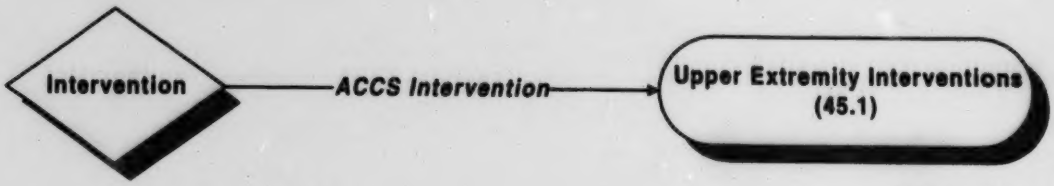


ACCS Grouper
09/98

ACCS CELL
44 Chest Wall Interventions

ACCS Cell	ICD-9-CM Code	ICD-9-CM Description
44 CHEST WALL INTERVENTIONS	7701	SEQUESTRECTOMY SCAP/CLAV/THORAX
	7703	SEQUESTRECTOMY RADIUS AND ULNA
	7704	SEQUESTRECTOMY CARPALS/METACARP
	7709	SEQUESTRECTOMY OTHER SPEC SITE
	7710	OTH INCIS BONE NO DIV SITE NOS
	7711	OTH INCIS BONE NO DIV SCAP/CLAV
	7719	OTH INCIS BONE NO DIV OTH SPEC
	7731	OTH DIVIS BONE SCAP/CLAV/THORAX
	7739	OTH DIVISION BONE OTH SPEC SITE
	7740	BIOPSY OF BONE UNSPECIFIED SITE
	7741	BIOPSY SCAPULA/CLAVICLE/THORAX
	7749	BIOPSY OF BONE OTHER SPEC SITE
	7760	LOC EXCISION LES/TISS SITE NOS
	7761	LOC EXCIS LES/TISS SC/CLAV/THOR
	7763	LOC EXCIS LES/TISS RADIUS/ULNA
	7769	LOC EXCISION LES/TISS OTH SPEC
	7781	OTH PART OSTECTOMY SC/CLAV/THOR
	7789	OTH PARTIAL OSTECTOMY OTH SPEC
	7799	TOTAL OSTECTOMY OTHER SPEC SITE
	7801	BONE GRAFT SCAPULA/CLAV/THORAX
	7809	BONE GRAFT OTHER SPECIFIED SITE
	7811	APP EXT FIX SCAP/CLAV/THORAX
	7819	APPL EXT FIX DEV OTH SPEC SITE
	7841	OTH REPR/PLAST OP SC/CLAV/THOR
	7849	OTH REPR/PLAST OP OTH SPEC SITE
	7859	INT FIX NO # REDUCTN SPEC SITE
	7891	INSERT GROWTH STIM SC/CLAV/THOR
	7899	INSRT GROWTH STIM OTH SPEC BONE
	7969	DEBRIDEMENT OPEN FRACT OTH BONE
	8010	OTHER ARTHROTOMY UNSPEC SITE
	8049	DIV JNT CAPS/LIG/CART OTH SITE
	8089	OTH EXCIS/DESTR LES OTHER JOINT
	8332	EXCISION OF LESION OF MUSCLE
	8349	OTHER EXCISION OF SOFT TISSUE

ACCS Intervention Cell



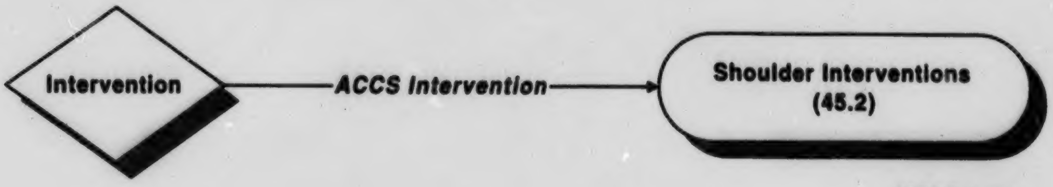
ACCS Grouper
09/98

ACCS CELL
45.1 Upper Extremity Interventions

ACCS Cell	ICD-9-CM Code	ICD-9-CM Description
45.1 UPPER EXTREMITY INTERVENTIONS	7702	SEQUESTRECTOMY HUMERUS
	7712	OTH INCIS BONE NO DIVIS HUMERUS
	7713	OTH INCIS BONE NO DIV RAD/ULNA
	7722	WEDGE OSTEOTOMY HUMERUS
	7729	WEDGE OSTEOTOMY OTHER SPEC SITE
	7732	OTHER DIVISION BONE HUMERUS
	7733	OTHER DIVISION BONE RADIUS/ULNA
	7742	BIOPSY OF HUMERUS
	7743	BIOPSY OF RADIUS AND ULNA
	7762	LOCAL EXCISION LES/TISS HUMERUS
	7782	OTHER PARTIAL OSTECTOMY HUMERUS
	7783	OTH PART OSTECTOMY RADIUS/ULNA
	7802	BONE GRAFT HUMERUS
	7803	BONE GRAFT RADIUS AND ULNA
	7812	APPL EXT FIX DEVICE HUMERUS
	7813	APPL EXT FIX DEVICE RADIUS/ULNA
	7823	LIMB SHORTENING RADIUS/ULNA
	7824	LIMB SHORTENING CARP/METACAR
	7833	LIMB LENGTH PROC RADIUS/ULNA
	7842	OTHER REPAIR/PLASTIC OP HUMERUS
	7843	OTH REPAIR/PLAST OP RADIUS/ULNA
	7853	INT FIX NO # REDUCTION RAD/ULNA
	7892	INSERTION GROWTH STIM HUMERUS
	7893	INSERT GROWTH STIM RADIUS/ULNA
	7911	CL REDUCTION # INT FIX HUMERUS
	7912	CL REDUCT # INT FIX RADIUS/ULNA
	7921	OP REDUCTN # NO INT FIX HUMERUS
	7922	OP REDUCT # NO INT FIX RAD/ULNA
	7929	OP REDUCT # NO INT FIX OTH BONE
	7931	OPEN REDUCTN # INT FIX HUMERUS
	7932	OP REDUCT # INT FIX RADIUS/ULNA
	7939	OPEN REDUCTN # INT FIX OTH BONE
	7962	DEBRIDEMENT OPEN # RADIUS/ULNA
	7973	CL REDUCTION DISLOCATION WRIST
	7982	OP REDUCTION DISLOCATION ELBOW
	7983	OP REDUCTION DISLOCATION WRIST
	8002	ARTHROTOMY/REMOVAL PROSTH ELBOW
	8003	ARTHROTOMY/REMOVAL PROSTH WRIST
	8012	OTHER ARTHROTOMY OF ELBOW
	8013	OTHER ARTHROTOMY OF WRIST

ACCS Cell	ICD-9-CM Code	ICD-9-CM Description
45.1 UPPER EXTREMITY INTERVENTIONS	8022	ARTHROSCOPY OF ELBOW
	8023	ARTHROSCOPY OF WRIST
	8030	BIOPSY JOINT STRUCTURE SITE NOS
	8032	BIOPSY JOINT STRUCTURE OF ELBOW
	8033	BIOPSY JOINT STRUCTURE OF WRIST
	8039	BIOPSY JOINT STRUCTURE OTH SITE
	8042	DIVIS JOINT CAPS/LIG/CART ELBOW
	8072	SYNOVECTOMY OF ELBOW
	8073	SYNOVECTOMY OF WRIST
	8080	OTH EXCISN/DESTR LES JOINT NOS
	8082	OTH EXCIS/DESTRUCT LESION ELBOW
	8090	OTHER EXCISION UNSPEC JOINT
	8092	OTHER EXCISION OF ELBOW JOINT
	8093	OTHER EXCISION OF WRIST JOINT
	8099	OTHER EXCISION OTHER SPEC JOINT
	8125	CARPORADIAL FUSION
	8185	OTHER REPAIR OF ELBOW
	8195	SUTURE CAPS/LIG OTH LOW EXTREM
	8196	OTHER REPAIR OF JOINT
	8197	REVIS JOINT REPLAC UPPER EXTREM
	8421	THUMB REATTACHMENT

ACCS Intervention Cell

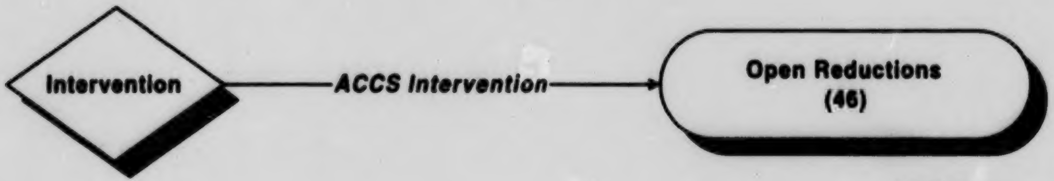


ACCS Grouper
09/98

ACCS CELL
45.2 Shoulder Interventions

ACCS Cell	ICD-9-CM Code	ICD-9-CM Description
45.2 SHOULDER INTERVENTIONS	7851	INT FIX NO # REDUCTN SCAP/CLAV
	7981	OP REDUCT DISLOCATION SHOULDER
	8001	ARTHROTOMY/REMOV PROSTH SHOULD
	8011	OTHER ARTHROTOMY OF SHOULDER
	8021	ARTHROSCOPY OF SHOULDER
	8031	BIOPSY JOINT STRUCTURE SHOULDER
	8041	DIV JNT CAPS/LIG/CART SHOULDER
	8071	SYNOVECTOMY OF SHOULDER
	8081	OTH EXCIS/DESTR LESION SHOULDER
	8091	OTHER EXCISION SHOULDER JOINT
	8123	ARTHRODESIS OF SHOULDER
	8180	TOTAL SHOULDER REPLACEMENT
	8181	PARTIAL SHOULDER REPLACEMENT
	8182	REPR RECURRENT DISLOCATN SHOULD
	8183	OTHER REPAIR OF SHOULDER
	8363	ROTATOR CUFF REPAIR

ACCS Intervention Cell

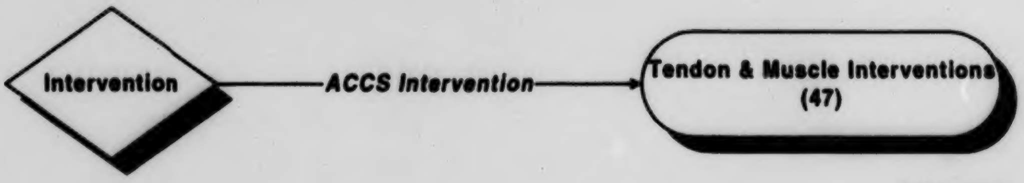


ACCS Grouper
06/98

ACCS CELL
46 Open Reductions

ACCS Cell	ICD-9-CM Code	ICD-9-CM Description
46 OPEN REDUCTIONS	7724	WEDGE OSTEOTOMY CARPAL/METACARP
	7734	OTH DIVIS BONE CARPALS/METACARP
	7744	BIOPSY OF CARPALS/METACARPALS
	7751	BUNIONECT/TISSUE CORR/OSTEOTOMY
	7752	BUNIONECT/TISS CORR/ARTHRODESIS
	7753	OTH BUNIONECT/SOFT TISS CORRECT
	7754	EXCISION/CORRECTION BUNIONETTE
	7759	OTHER BUNIONECTOMY
	7784	OTH PART OSTECTOMY MET/CARPALS
	7854	INT FIX NO # REDUCTN MET/CARPAL
	7913	CL REDUCTN # INT FIX MET/CARPAL
	7914	CL REDUCTN # INT FIX PHAL HAND
	7917	CL REDUCTN # INT FIX MET/TARSAL
	7918	CL REDUCTN # INT FIX PHAL FOOT
	7919	CL REDUCTION # INT FIX OTH BONE
	7923	OP REDUCT # NO INT FIX MET/CARP
	7924	OP REDUCT # NO INT FIX PHAL HND
	7930	OPEN REDUCTN # INT FIX BONE NOS
	7933	OP REDUCTN # INT FIX MET/CARPAL
	7934	OP REDUCTN # INT FIX PHAL HAND
	7938	OP REDUCTN # INT FIX PHAL FOOT
	7950	OP REDUCTION SEP EPIPH BONE NOS
	7951	OP REDUCTION SEP EPIPH HUMERUS
	7952	OP REDUCTION SEP EPIPH RAD/ULNA
	7955	OPEN REDUCTION SEP EPIPH FEMUR
	7956	OP REDUCTN SEP EPIPH TIBIA/FIB
	7959	OP REDUCTION SEP EPIPH OTH BONE
	7964	DEBRIDEMENT OPEN # PHALANG HAND
	7968	OP REDUCT DISLOCATION FOOT/TOE
	8006	ARTHROT/REMOVAL PROSTH FOOT/TOE
	8116	METATARSOPHALANGEAL FUSION
	8126	METACARPOCARPAL FUSION
	8127	METACARPOPHALANGEAL FUSION
	8128	INTERPHALANGEAL FUSION
	8171	ARTHR METACARP/INTERPHAL W IMPL
	8499	OTHER OP MUSCULOSKELETAL SYSTEM

ACCS Intervention Cell



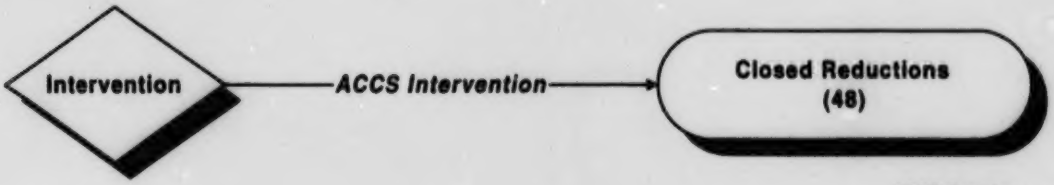
ACCS Grouper
09/98

ACCS CELL
47 Tendon & Muscle Interventions

ACCS Cell	ICD-9-CM Code	ICD-9-CM Description
47 TENDON & MUSCLE INTERVENTIONS	4286	PRODUCT SUBCU TUNNEL NO ANAST
	7764	LOC EXCISION LES/TISS MET/CARP
	7794	TOTAL OSTECTOMY CARPAL/METACARP
	7804	BONE GRAFT CARPALS/METACARPALS
	7810	APPL EXT FIX DEVICE UNSPEC SITE
	7814	APPL EXT FIX DEV CARP/METACARP
	7820	LIMB SHORTENING UNSPEC SITE
	7840	OTH REPAIR/PLAST OP UNSPEC SITE
	7844	OTH REPAIR/PLAST OP MET/CARPALS
	7852	INT FIX NO # REDUCTION HUMERUS
	7890	INSERT GROWTH STIM UNSPEC BONE
	7894	INSRT GROWTH STIM CARP/METACARP
	7984	OP REDUCT DISLOCATN HAND/FINGER
	8004	ARTHROT/REMOV PROSTH HAND/FING
	8020	ARTHROSCOPY OF UNSPECIFIED SITE
	8024	ARTHROSCOPY OF HAND AND FINGER
	8040	DIV JNT CAPS/LIG/CART SITE NOS
	8044	DIV JNT CAPS/LIG/CART HAND/FING
	8070	SYNOVECTOMY OF UNSPECIFIED SITE
	8074	SYNOVECTOMY OF HAND AND FINGER
	8083	OTH EXCIS/DESTRUCT LESION WRIST
	8172	ARTHR METACARP/INTERPHL NO IMPL
	8173	TOTAL WRIST REPLACEMENT
	8174	ARTHR CARPOCARP/CARPOMET W IMPL
	8175	ARTHR CARPOCAR/CARPOMET NO IMPL
	8179	OTHER REPAIR HAND/FINGERS/WRIST
	8193	SUTURE CAPS/LIG UPPER EXTREMITY
	8199	OTH OPERATIONS JOINT STRUCTURES
	8212	FASCIOTOMY OF HAND
	8222	EXCISION LESION MUSCLE OF HAND
	8235	OTHER FASCIECTOMY OF HAND
	8236	OTHER MYECTOMY OF HAND
	8241	SUTURE OF TENDON SHEATH OF HAND
	8242	DELAYED SUTURE FLEXOR TEND HAND
	8244	OTHER SUTURE FLEXOR TENDON HAND
	8245	OTHER SUTURE OTHER TENDON HAND
	8246	SUTURE OF MUSCLE/FASCIA OF HAND
	8251	ADVANCEMENT OF TENDON OF HAND
	8253	REATTACHMENT OF TENDON OF HAND
	8255	OTH CHANGE HAND MUSC/TEND LENG

ACCS Cell	ICD-9-CM Code	ICD-9-CM Description
47 TENDON & MUSCLE INTERVENTIONS	8256	OTH HAND TEND TRANSFER/TRANSPL
	8258	OTH HAND MUSC TRANSFER/TRANSPL
	8261	POLLICIZATN/CARRYOVER NEUROVASC
	8269	OTHER RECONSTRUCTION OF THUMB
	8271	TENDON PULLEY RECONSTRUCT HAND
	8272	PLAST OP HAND W GRAFT MUSC/FASC
	8279	PLAST OP HAND W OTH GRAFT/IMPL
	8281	TRANSFER OF FINGER EXCEPT THUMB
	8283	REPAIR OF MACRODACTYLY
	8285	OTHER TENODESIS OF HAND
	8286	OTHER TENOPLASTY OF HAND
	8289	OTHER PLASTIC OPERATION ON HAND
	8299	OTH OP MUSCLE/TEND/FASCIA HAND
	8302	MYOTOMY
	8314	FASCIOTOMY
	8344	OTHER FASCIECTOMY
	8345	OTHER MYECTOMY
	8361	SUTURE OF TENDON SHEATH
	8362	DELAYED SUTURE OF TENDON
	8364	OTHER SUTURE OF TENDON
	8365	OTHER SUTURE MUSCLE OR FASCIA
	8371	ADVANCEMENT OF TENDON
	8373	REATTACHMENT OF TENDON
	8374	REATTACHMENT OF MUSCLE
	8375	TENDON TRANSFER/TRANSPLANTATION
	8377	MUSCLE TRANSFER/TRANSPLANTATION
	8381	TENDON GRAFT
	8382	GRAFT OF MUSCLE OR FASCIA
	8383	TENDON PULLEY RECONSTRUCTION
	8385	OTH CHANGE MUSCLE/TENDON LENGTH
	8386	QUADRICEPSPLASTY
	8387	OTHER PLASTIC OPERATIONS MUSCLE
	8388	OTHER PLASTIC OPERATIONS TENDON
	8391	LYSIS ADHES MUSC/TEND/FASC/BURS
	8685	CORRECTION OF SYNDACTYLY
	9986	NONINVAS PLACE BONE GROW STIM

ACCS Intervention Cell

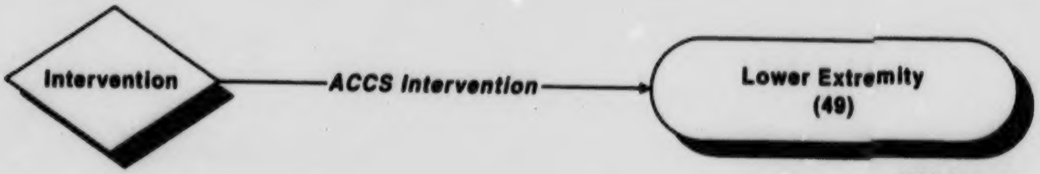


ACCS Grouper
09/98

ACCS CELL
48 Closed Reductions

ACCS Cell	ICD-9-CM Code	ICD-9-CM Description
48 CLOSED REDUCTIONS	7873	OSTEOCLASIS RADIUS AND ULNA
	7874	OSTEOCLASIS CARPALS/METACARPALS
	7879	OSTEOCLASIS OTH SPECIFIED SITE
	7900	CL REDUCT # NO INT FIX BONE NOS
	7901	CL REDUCTN # NO INT FIX HUMERUS
	7902	CL REDUCT # NO INT FIX RAD/ULNA
	7903	CL REDUCT # NO INT FIX MET/CARP
	7904	CL REDUCT # NO INT FIX PHAL HND
	7909	CL REDUCT # NO INT FIX OTH BONE
	7940	CL REDUCTION SEP EPIPH BONE NOS
	7941	CL REDUCTION SEP EPIPH HUMERUS
	7942	CL REDUCTION SEP EPIPH RAD/ULNA
	7945	CL REDUCTION SEP EPIPH FEMUR
	7946	CL REDUCTN SEP EPIPH TIBIA/FIB
	7949	CL REDUCTION SEP EPIPH OTH BONE
	7970	CL REDUCT DISLOCATION SITE NOS
	7971	CL REDUCT DISLOCATION SHOULDER
	7972	CL REDUCTION DISLOCATION ELBOW
	7974	CL REDUCT DISLOCATN HAND/FINGER

ACCS Intervention Cell

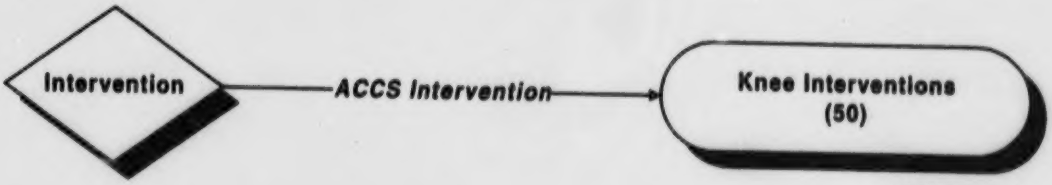


ACCS Grouper
09/96

ACCS CELL
49 Lower Extremity

ACCS Cell	ICD-9-CM Code	ICD-9-CM Description
49 LOWER EXTREMITY	7705	SEQUESTRECTOMY FEMUR
	7707	SEQUESTRECTOMY TIBIA AND FIBULA
	7715	OTHER INCIS BONE NO DIVIS FEMUR
	7717	OTH INCIS BONE NO DIVIS TIB/FIB
	7737	OTH DIVISION BONE TIBIA/FIBULA
	7745	BIOPSY OF FEMUR
	7747	BIOPSY OF TIBIA AND FIBULA
	7765	LOCAL EXCISION LES/TISSUE FEMUR
	7767	LOC EXCIS LES/TISS TIBIA/FIBULA
	7785	OTHER PARTIAL OSTECTOMY FEMUR
	7787	OTH PART OSTECTOMY TIBIA/FIBULA
	7807	BONE GRAFT TIBIA AND FIBULA
	7817	APPL EXT FIX DEVICE TIB/FIB
	7825	LIMB SHORTENING PROCEDURE FEMUR
	7827	LIMB SHORTENING PROC TIB/FIB
	7829	LIMB SHORTENING OTH SPEC BONE
	7835	LIMB LENGTH PROC FEMUR
	7837	LIMB LENGTH PROC TIB/FIB
	7839	LIMB LENGTH PROC OTH SPEC BONE
	7847	OTH REPR/PLAST OP TIBIA/FIBULA
	7855	INT FIX NO # REDUCTION FEMUR
	7857	INT FIX NO # REDUCTN TIBIA/FIB
	7877	OSTEOCLASIS TIBIA AND FIBULA
	7897	INSERT GROWTH STIM TIBIA/FIBULA
	7905	CL REDUCTION # NO INT FIX FEMUR
	7906	CL REDUCTN # NO INT FIX TIB/FIB
	7916	CL REDUCTN # INT FIX TIBIA/FIB
	7926	OP REDUCTN # NO INT FIX TIB/FIB
	7936	OP REDUCTN # INT FIX TIBIA/FIB
	7966	DEBRIDEMENT OPEN # TIBIA/FIBULA
	7975	CL REDUCTION DISLOCATION HIP
	8015	OTHER ARTHROTOMY OF HIP
	8025	ARTHROSCOPY OF HIP
	8035	BIOPSY JOINT STRUCTURE OF HIP
	8075	SYNOVECTOMY OF HIP
	8085	OTH EXCISN/DESTRUCT LESION HIP
	8312	ADDUCTOR TENOTOMY OF HIP

ACCS Intervention Cell

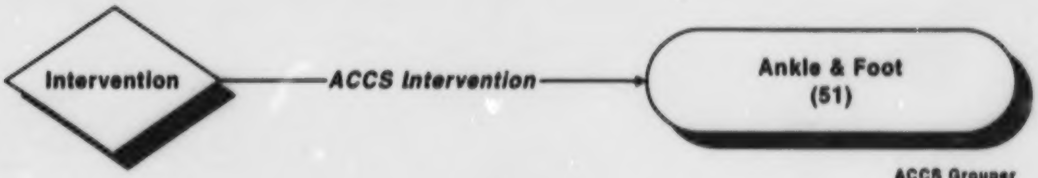


ACCS Grouper
09/98

ACCS CELL
50 Knee Interventions

ACCS Cell	ICD-9-CM Code	ICD-9-CM Description
50 KNEE INTERVENTIONS	7706	SEQUESTRECTOMY PATELLA
	7708	SEQUESTRECTOMY TARSALS/METATARS
	7716	OTH INCIS BONE NO DIVIS PATELLA
	7726	WEDGE OSTEOTOMY PATELLA
	7736	OTHER DIVISION BONE PATELLA
	7746	BIOPSY OF PATELLA
	7766	LOCAL EXCISION LES/TISS PATELLA
	7776	EXCISION BONE FOR GRAFT PATELLA
	7786	OTHER PARTIAL OSTECTOMY PATELLA
	7796	TOTAL OSTECTOMY PATELLA
	7816	APPL EXT FIX DEVICE PATELLA
	7846	OTHER REPAIR/PLASTIC OP PATELLA
	7856	INT FIX NO # REDUCTION PATELLA
	7896	INSERTION GROWTH STIM PATELLA
	7976	CL REDUCTION DISLOCATION KNEE
	7986	OPEN REDUCTION DISLOCATION KNEE
	8006	ARTHROTOMY/REMOVAL PROSTH KNEE
	8016	OTHER ARTHROTOMY OF KNEE
	8026	ARTHROSCOPY OF KNEE
	8029	ARTHROSCOPY OF OTHER SPEC SITE
	8036	BIOPSY JOINT STRUCTURE OF KNEE
	8046	DIVIS JOINT CAPS/LIG/CART KNEE
	806	EXCISN SEMILUNAR CARTILAGE KNEE
	8076	SYNOVECTOMY OF KNEE
	8086	OTH EXCISN/DESTRUCT LESION KNEE
	8096	OTHER EXCISION OF KNEE JOINT
	8144	PATELLAR STABILIZATION
	8145	OTHER REPAIR CRUCIATE LIGAMENTS
	8146	OTH REPAIR COLLATERAL LIGAMENTS
	8147	OTHER REPAIR OF KNEE

ACCS Intervention Cell

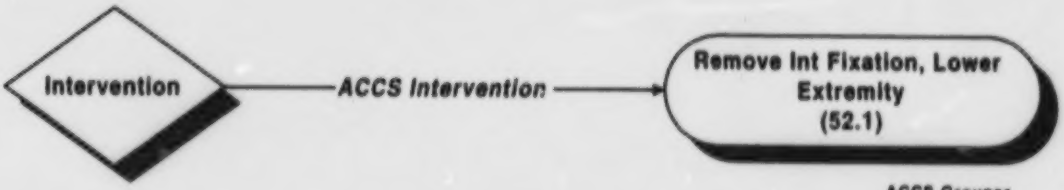


ACCS Grouper
09/98

ACCS CELL
51 Ankle & Foot

ACCS Cell	ICD-9-CM Code	ICD-9-CM Description
51 ANKLE & FOOT	7728	WEDGE OSTEOTOMY TARSAL/METATARS
	7738	OTH DIVIS BONE TARSALS/METATARS
	7748	BIOPSY OF TARSALS/METATARSALS
	7768	LOC EXCISION LES/TISS MET/TARS
	7788	OTH PART OSTECTOMY MET/TARSALS
	7798	TOTAL OSTECTOMY TARSAL/METATARS
	7808	BONE GRAFT TARSALS/METATARSALS
	7818	APPL EXT FIX DEV TARS/METATARS
	7828	LIMB SHORTENING TARS/METATAR
	7838	LIMB LENGTH PROC TARS/METATARS
	7848	OTH REPAIR/PLAST OP MET/TARSALS
	7878	OSTEOCLASIS TARSALS/METATARSALS
	7898	INSRT GROWTH STIM TARS/METATARS
	7907	CL REDUCT # NO INT FIX MET/TARS
	7927	OP REDUCT # NO INT FIX MET/TARS
	7937	OP REDUCTN # INT FIX MET/TARSAL
	7977	CL REDUCTION DISLOCATION ANKLE
	7987	OP REDUCTION DISLOCATION ANKLE
	8007	ARTHROTOMY/REMOVAL PROSTH ANKLE
	8017	OTHER ARTHROTOMY OF ANKLE
	8027	ARTHROSCOPY OF ANKLE
	8037	BIOPSY JOINT STRUCTURE OF ANKLE
	8047	DIVIS JOINT CAPS/LIG/CART ANKLE
	8077	SYNOVECTOMY OF ANKLE
	8078	SYNOVECTOMY OF FOOT AND TOE
	8087	OTH EXCIS/DESTRUCT LESION ANKLE
	8097	OTHER EXCISION OF ANKLE JOINT
	8111	ANKLE FUSION
	8113	SUBTALAR FUSION
	8115	TARSOMETATARSAL FUSION
	8117	OTHER FUSION OF FOOT
	8120	ARTHRODESIS UNSPECIFIED JOINT
	8129	ARTHRODESIS OTHER SPEC JOINTS
	8149	OTHER REPAIR OF ANKLE
	8157	REPLACEMENT OF JOINT FOOT/TOE
	8159	REVIS JOINT REPL LOW EXTREM NEC
	8194	SUTURE CAPSULE/LIG ANKLE/FOOT
	8384	RELEASE OF CLUBFOOT NEC
	843	REVISION OF AMPUTATION STUMP

ACCS Intervention Cell

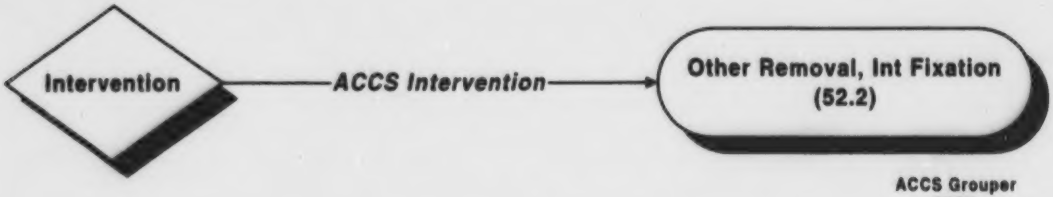

Intervention
ACCS Intervention
Remove Int Fixation, Lower Extremity (52.1)

ACCS Grouper
09/98

ACCS CELL
52.1 Remove Int Fixation, Low Extrem

ACCS Cell	ICD-9-CM Code	ICD-9-CM Description
52.1 REMOVE INT FIXATION, LOW EXTREMITY	7865	REMOVAL IMPLANT DEVICE FEMUR
	7866	REMOVAL IMPLANT DEVICE PATELLA
	7867	REMOV IMPLANT DEV TIBIA/FIBULA
	7868	REMOVAL IMPLANT DEV MET/TARSALS

ACCS Intervention Cell

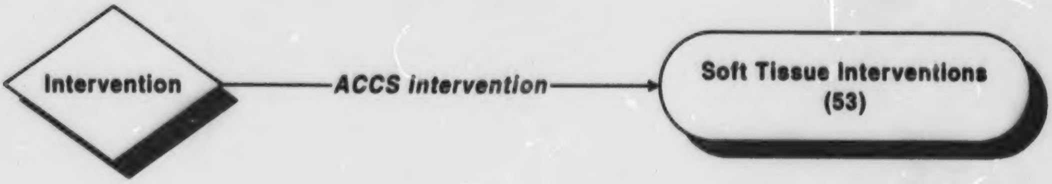

Intervention
ACCS Intervention
Other Removal, Int Fixation (52.2)

ACCS Grouper
09/98

ACCS CELL
52.2 Other Removal, Int Fixation

ACCS Cell	ICD-9-CM Code	ICD-9-CM Description
52.2 OTHER REMOVAL, INT FIXATION	7697	REMOVAL INT FIX DEV FACIAL BONE
	7860	REMOV IMPLANT DEV BONE SITE NOS
	7861	REMOV IMPLANT DEV SC/CLAV/THOR
	7862	REMOVAL IMPLANT DEVICE HUMERUS
	7863	REMOVAL IMPLANT DEV RADIUS/ULNA
	7864	REMOVAL IMPLANT DEV MET/CARPALS
	7869	REMOV IMPLANT DEV BONE OTH SPEC

ACCS Intervention Cell



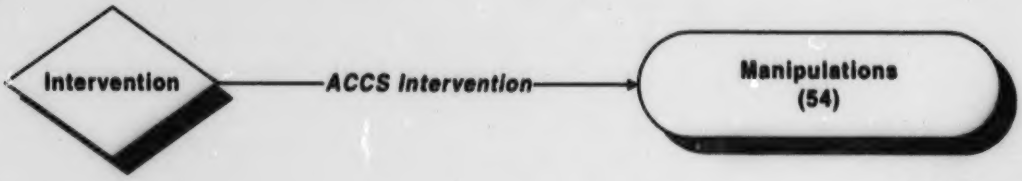
ACCS Grouper
05/98

ACCS CELL
53 Soft Tissue Interventions

ACCS Cell	ICD-9-CM Code	ICD-9-CM Description
53 SOFT TISSUE INTERVENTIONS	7714	OTH INCIS BONE NO DIV MET/CARP
	7718	OTH INCIS BONE NO DIV MET/TARS
	7756	REPAIR OF HAMMER TOE
	7757	REPAIR OF CLAW TOE
	7758	OTH EXCISION/FUSION/REPAIR TOES
	7908	CL REDUCTN # NO INT FIX PHAL FT
	7928	OP REDUCTN # NO INT FIX PHAL FT
	7963	DEBRIDE OPEN # CARPALS/METACARP
	7978	CL REDUCT DISLOCATION FOOT/TOE
	7979	CL REDUCT DISLOCATION OTH SITE
	8009	ARTHROT/REMOVAL PROSTH OTH SITE
	8014	OTHER ARTHROTOMY OF HAND/FINGER
	8018	OTHER ARTHROTOMY OF FOOT/TOE
	8019	OTHER ARTHROTOMY OTH SPEC SITE
	8034	BIOPSY JOINT STRUCT HAND/FINGER
	8043	DIVIS JOINT CAPS/LIG/CART WRIST
	8048	DIV JNT CAPS/LIG/CART FOOT/TOE
	8084	OTH EXCIS/DESTR LES HAND/FINGER
	8088	OTH EXCIS/DESTR LESION FOOT/TOE
	8094	OTH EXCISION HAND/FINGER JOINT
	8098	OTHER EXCISION FOOT/TOE JOINT
	8198	OTH DX PROCEDURES JOINT STRUCT
	8201	EXPLORATION TENDON SHEATH HAND
	8202	MYOTOMY OF HAND
	8204	INCIS/DRAIN PALMAR/THENAR SPACE
	8209	OTHER INCISION SOFT TISSUE HAND
	8211	TENOTOMY OF HAND
	8219	OTHER DIVISION SOFT TISSUE HAND
	8221	EXCISION LES TENDON SHEATH HAND
	8229	EXCISION OTH LES SOFT TISS HAND
	8231	BURSECTOMY OF HAND
	8233	OTHER TENONECTOMY OF HAND
	8239	OTHER EXCISION SOFT TISSUE HAND
	8243	DELAYED SUTURE OTH TENDON HAND
	8284	REPAIR OF MALLET FINGER
	8291	LYSIS OF ADHESIONS OF HAND
	8301	EXPLORATION OF TENDON SHEATH
	8303	BURSOTOMY
	8309	OTHER INCISION OF SOFT TISSUE

ACCS Cell	ICD-9-CM Code	ICD-9-CM Description
53 SOFT TISSUE INTERVENTIONS	8311	ACHILLOTENOTOMY
	8313	OTHER TENOTOMY
	8319	OTHER DIVISION OF SOFT TISSUE
	8321	BIOPSY OF SOFT TISSUE
	8329	OTH DX PROC MUSC/TEND/FASC/BURS
	8331	EXCISION LESION TENDON SHEATH
	8339	EXCISION LESION OTH SOFT TISSUE
	8342	OTHER TENONECTOMY
	835	BURSECTOMY
	8389	OTHER PLASTIC OPERATIONS FASCIA
	8399	OTH OP MUSCLE/TEND/FASCIA/BURSA
	8401	AMPUTATION/DISARTICULATN FINGER
	8402	AMPUTATION/DISARTICULATN THUMB
	8411	AMPUTATION OF TOE
	8422	FINGER REATTACHMENT

ACCS Intervention Cell

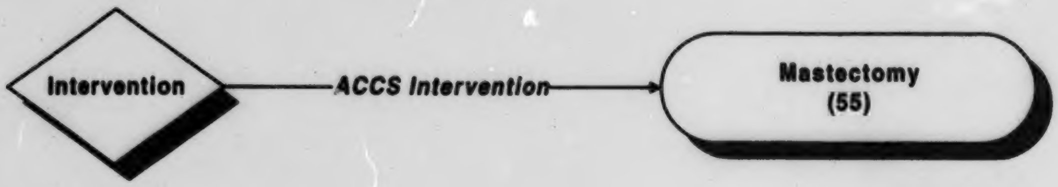

Intervention
ACCS Intervention
Manipulations
(54)

ACCS Grouper
09/98

ACCS CELL
54 Manipulations

ACCS Cell	ICD-9-CM Code	ICD-9-CM Description
54 MANIPULATIONS	7695	OTHER MANIP TEMPOROMANDIB JOINT
	9739	REMOVAL OTH THER DEV HEAD/NECK
	9788	REMOVAL EXT IMMOBILIZATN DEVICE

ACCS Intervention Cell

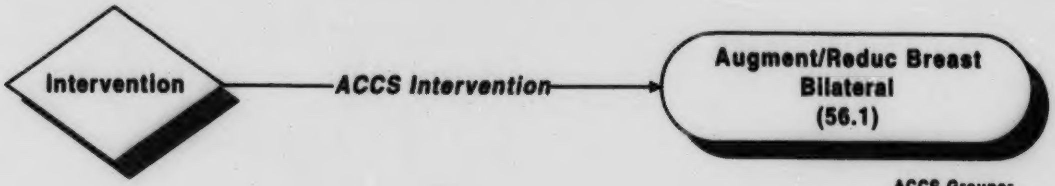


ACCS Grouper
09/98

ACCS CELL
55 Mastectomy

ACCS Cell	ICD-9-CM Code	ICD-9-CM Description
55 MASTECTOMY	8511	CLOSED BIOPSY OF BREAST
	8512	OPEN BIOPSY OF BREAST
	8519	OTHER DX PROCEDURES ON BREAST
	8521	LOCAL EXCISION LESION OF BREAST
	8522	RESECTION OF QUADRANT OF BREAST
	8523	SUBTOTAL MASTECTOMY
	8524	EXCISION ECTOPIC BREAST TISSUE
	8534	OTH UNILATERAL SUBCU MAMMECTOMY
	8536	OTH BILATERAL SUBCU MAMMECTOMY
	8541	UNILATERAL SIMPLE MASTECTOMY
	8542	BILATERAL SIMPLE MASTECTOMY
	8543	UNILAT EXTENDED SIMPLE MASTECT

ACCS Intervention Cell

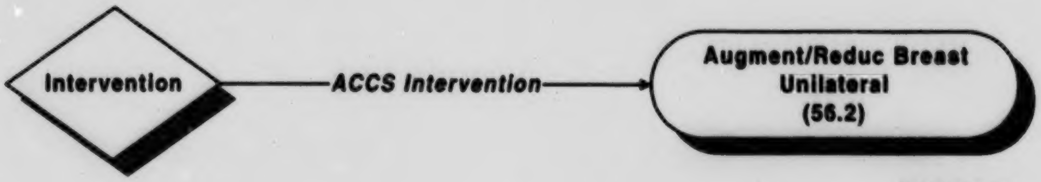

Intervention
ACCS Intervention
Augment/Reduc Breast Bilateral (56.1)

ACCS Grouper
09/98

ACCS CELL
56.1 Augment/Reduc Breast Bilateral

ACCS Cell	ICD-9-CM Code	ICD-9-CM Description
56.1 AUGMENT/REDUC BREAST BILATERAL	8532	BILATERAL REDUCTION MAMMOPLASTY
	8535	BILAT SUBCU MAMMECTOMY/IMPLANT
	8552	BILAT INJECTION BREAST AUGMENT
	8554	BILATERAL BREAST IMPLANT

ACCS Intervention Cell

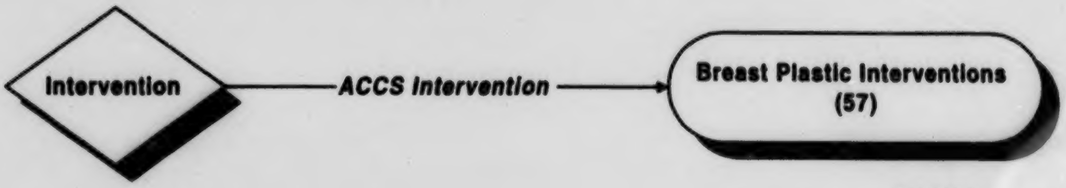


ACCS Grouper
09/98

ACCS CELL
56.2 Augment/Reduc Breast Unilateral

ACCS Cell	ICD-9-CM Code	ICD-9-CM Description
56.2 AUGMENT/REDUC BREAST UNILATERAL	8531	UNILATERAL REDUCT MAMMOPLASTY
	8533	UNIL SUBCU MAMMECTOMY W IMPLANT
	8550	AUGMENTATION MAMMOPLASTY NOS
	8551	UNILAT INJECTION BREAST AUGMENT
	8553	UNILATERAL BREAST IMPLANT
	856	MASTOPEXY
	857	TOTAL RECONSTRUCTION OF BREAST
	8583	FULL THICKNESS SKIN GRF BREAST
	8584	PEDICLE GRAFT TO BREAST
	8589	OTHER MAMMOPLASTY
	8593	REVISION OF IMPLANT OF BREAST
	8594	REMOVAL OF IMPLANT OF BREAST
	8595	INSERT BREAST TISSUE EXPANDER
	8596	REMOVAL BREAST TISSUE EXPANDER

ACCS Intervention Cell

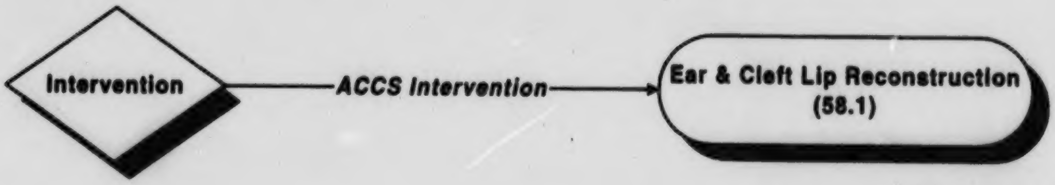

Intervention
ACCS Intervention
Breast Plastic Interventions
(57)

ACCS Grouper
09/98

ACCS CELL
57 Breast Plastic Interventions

ACCS Cell	ICD-9-CM Code	ICD-9-CM Description
57 BREAST PLASTIC INTERVENTIONS	850	MASTOTOMY
	8520	EXCIS/DESTR BREAST TISSUE NOS
	8525	EXCISION OF NIPPLE
	8581	SUTURE OF LACERATION OF BREAST
	8586	TRANSPOSITION OF NIPPLE
	8587	OTHER REPAIR/RECONSTRUCT NIPPLE
	8599	OTHER OPERATIONS ON THE BREAST

ACCS Intervention Cell

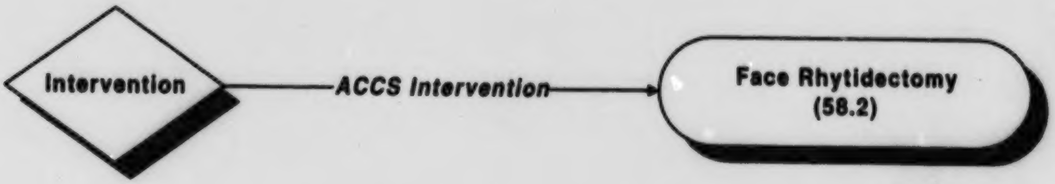

Intervention
ACCS Intervention
Ear & Cleft Lip Reconstruction
(58.1)

ACCS Grouper
09/98

ACCS CELL
58.1 Ear and Cleft Lip Reconstruction

ACCS Cell	ICD-9-CM Code	ICD-9-CM Description
58.1 EAR & CLEFT LIP RECONSTRUCTION	185	SURGICAL CORRECTN PROMINENT EAR
	186	RECONSTRUCT EXT AUDITORY CANAL
	2754	REPAIR OF CLEFT LIP
	2762	CORRECTION OF CLEFT PALATE
	2763	REVISION OF CLEFT PALATE REPAIR
	2769	OTHER PLASTIC REPAIR OF PALATE

ACCS Intervention Cell

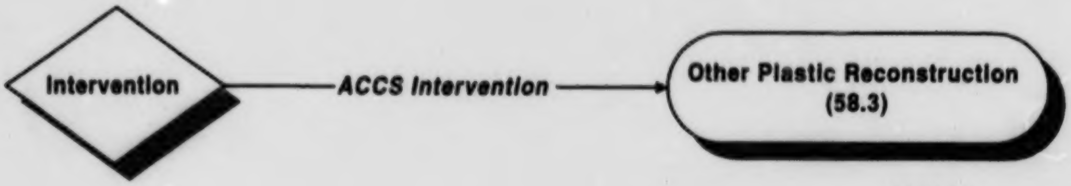

Intervention
ACCS Intervention
Face Rhytidectomy
(58.2)

ACCS Grouper
09/98

ACCS CELL
58.2 Face Rhytidectomy

ACCS Cell	ICD-9-CM Code	ICD-9-CM Description
58.2 FACE RHYTIDECTOMY	8682	FACIAL RHYTIDECTOMY

ACCS Intervention Cell

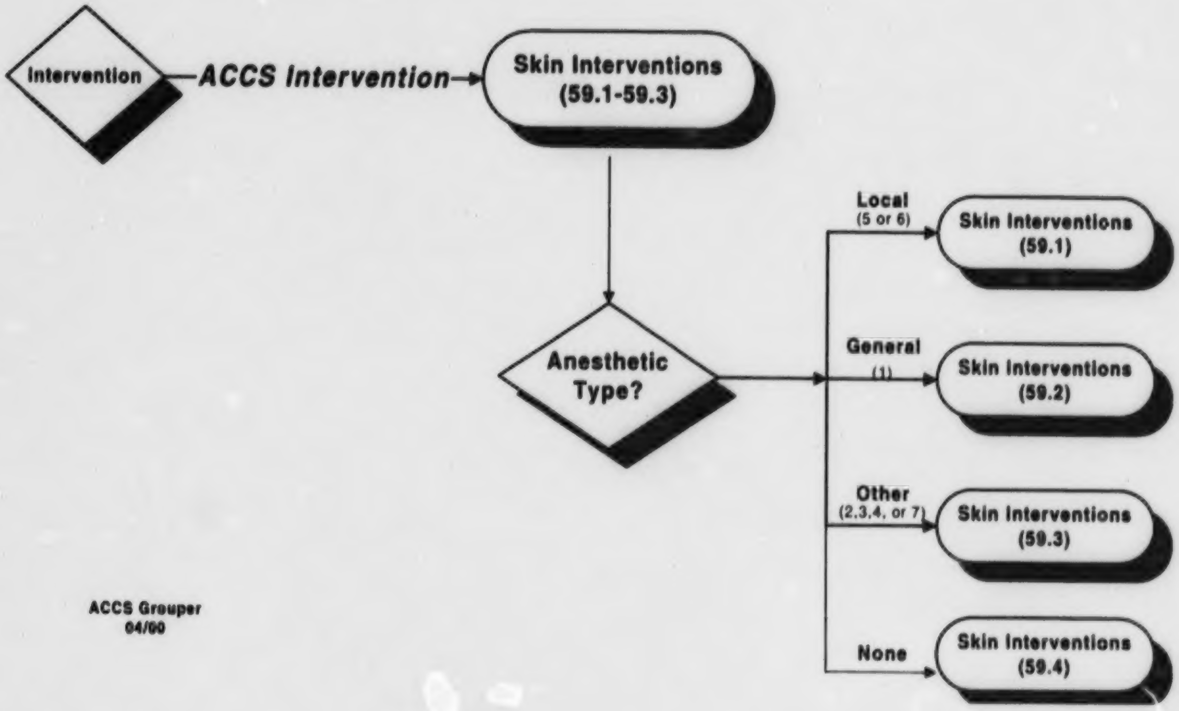


ACCS Grouper
09/98

ACCS CELL
58.3 Other Plastic Reconstruction

ACCS Cell	ICD-9-CM Code	ICD-9-CM Description
58.3 OTHER PLASTIC RECONSTRUCTION	2342	INSERTION OF FIXED BRIDGE
	242	GINGIVOPLASTY
	252	PARTIAL GLOSSECTOMY
	2751	SUTURE OF LACERATION OF LIP
	2753	CLOSURE OF FISTULA OF MOUTH
	2755	FULL-THICK SKIN GRAFT LIP/MOUTH
	2759	OTHER PLASTIC REPAIR OF MOUTH
	2779	OTHER OPERATIONS ON UVULA
	2792	INCISION MOUTH UNSPEC STRUCTURE
	7643	OTHER RECONSTRUCTION MANDIBLE
	7692	INSRT SYNTH IMPLANT FACIAL BONE
	8651	REPLANTATION OF SCALP
	8663	FULL THICK SKIN GRAFT OTH SITE
	8664	HAIR TRANSPLANT
	8666	HOMOGRAFT TO SKIN
	8670	PEDICLE OR FLAP GRAFT NOS
	8673	ATTACH PEDICLE/FLAP GRAFT HAND
	8674	ATTACH PED/FLAP GRAFT OTH SITE
	8675	REVISION OF PEDICLE/FLAP GRAFT
	8681	REPAIR FOR FACIAL WEAKNESS
	8691	EXCISION OF SKIN FOR GRAFT
	8693	INSERTION OF TISSUE EXPANDER
	9736	REMOVAL OTH EXT MANDIB FIX DEV

ACCS Intervention Cell


Intervention
ACCS Intervention
Skin Interventions (59.1-59.3)
Anesthetic Type?
Local (5 or 6)
Skin Interventions (59.1)
General (1)
Skin Interventions (59.2)
Other (2,3,4, or 7)
Skin Interventions (59.3)
None
Skin Interventions (59.4)

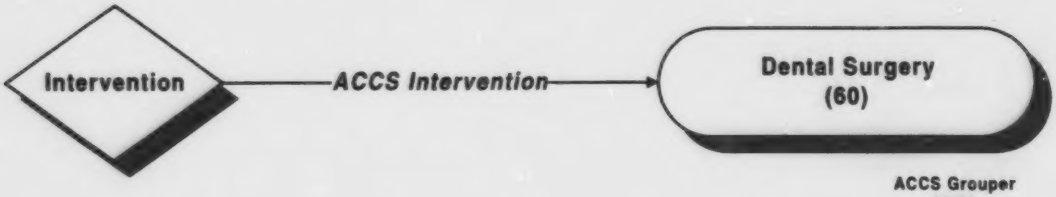
ACCS Grouper
04/00

ACCS CELL
59.1-59.3 Skin Interventions

ACCS Cell	ICD-9-CM Code	ICD-9-CM Description
59.1-59.4 SKIN INTERVENTIONS	1802	INCIS EXTERNAL AUDITORY CANAL
	1809	OTHER INCISION OF EXTERNAL EAR
	1812	BIOPSY OF EXTERNAL EAR
	1821	EXCISION OF PREAURICULAR SINUS
	1829	EXCISN/DESTRUCT OTH LES EXT EAR
	1831	RADICAL EXCISN LES EXTERNAL EAR
	1839	OTHER EXCISION OF EXTERNAL EAR
	184	SUTURE LACERATION EXTERNAL EAR
	1871	CONSTRUCTION OF AURICLE OF EAR
	1879	OTH PLASTIC REPAIR EXTERNAL EAR
	189	OTHER OPERATIONS EXTERNAL EAR
	2032	BIOPSY OF MIDDLE AND INNER EAR
	2181	SUTURE OF LACERATION OF NOSE
	2412	BIOPSY OF ALVEOLUS
	2432	SUTURE OF LACERATION OF GUM
	2501	CLOSED BIOPSY OF TONGUE
	2502	OPEN BIOPSY OF TONGUE
	251	EXCISN/DESTRUCT LES/TISS TONGUE
	2551	SUTURE OF LACERATION OF TONGUE
	2559	OTHER REPAIR/PLASTIC OP TONGUE
	2591	LINGUAL FRENOTOMY
	2592	LINGUAL FRENECTOMY
	2593	LYSIS OF ADHESIONS OF TONGUE
	2594	OTHER GLOSSOTOMY
	2599	OTHER OPERATIONS ON TONGUE
	271	INCISION OF PALATE
	2723	BIOPSY OF LIP
	2724	BIOPSY MOUTH UNSPEC STRUCTURE
	2731	LOC EXCIS/DESTR LES BONY PALATE
	2741	LABIAL FRENECTOMY
	2742	WIDE EXCISION OF LESION OF LIP
	2743	OTH EXCISION LESION/TISSUE LIP
	2749	OTHER EXCISION OF MOUTH
	2752	SUTURE LACERATN OTH PART MOUTH
	2756	OTHER SKIN GRAFT TO LIP/MOUTH
	2757	ATTACH PED/FLAP GRAFT LIP/MOUTH
	2761	SUTURE OF LACERATION OF PALATE
	2771	INCISION OF UVULA
	2772	EXCISION OF UVULA
	2773	REPAIR OF UVULA
	2791	LABIAL FRENOTOMY
	2799	OTHER OPERATIONS ON ORAL CAVITY
	8602	INJECT/TATTOO SKIN LES/DEFECT
	8603	INCISION PILONIDAL SINUS/CYST
	8604	OTH INCIS W DRAINAGE SKIN/SUBCU
	8605	INCISION W REMOV FB SKIN/SUBCU
	8609	OTH INCISION OF SKIN/SUBCU TISS
	8611	BIOPSY SKIN/SUBCUTANEOUS TISSUE
	8621	EXCISION PILONIDAL CYST/SINUS
	8622	EXCIS DEBRIDE WOUND/INFECT/BURN
	8623	REMOVAL NAIL/NAIL BED/NAIL FOLD
	8624	CHEMOSURGERY OF SKIN
	8625	DERMABRASION
	8626	LIGATION OF DERMAL APPENDAGE
	8627	DEBRIDE NAIL/NAIL BED/NAIL FOLD

ACCS Cell	ICD-9-CM Code	ICD-9-CM Description
59.1-59.4 SKIN INTERVENTIONS	8628	NONEXCS DEBRIDE WND/INFECT/BURN
	863	OTH EXCIS/DESTR LES SKIN/SUBCU
	864	RADICAL EXCISION OF SKIN LESION
	8659	SUTURE SKIN/SUBCU TISS OTH SITE
	8660	FREE SKIN GRAFT NOS
	8661	FULL THICKNESS SKIN GRAFT HAND
	8662	OTHER SKIN GRAFT TO HAND
	8669	OTHER SKIN GRAFT TO OTHER SITES
	8671	CUTTING/PREP PEDICLE GRAFT/FLAP
	8672	ADVANCEMENT OF PEDICLE GRAFT
	8683	SIZE REDUCT PLASTIC OPERATION
	8684	RELAXATION SCAR/CONTRACT SKIN
	8686	ONYCHOPLASTY
	8689	OTHER REPAIR/RECONST SKIN/SUBCU
	8692	ELECTROLYSIS/OTH EPILATION SKIN
	8699	OTH OPERATION SKIN/SUBCU TISSUE
	9820	REMOVAL OF FOREIGN BODY NOS
	9822	REMOV OTH FB HEAD/NECK NO INCIS
	9826	REMOVAL FB FROM HAND NO INCIS
	9827	REMOV FB OTH UPP LIMB NO INCIS
	9828	REMOVAL FB FROM FOOT NO INCIS
	9829	REMOV FB OTH LOW LIMB NO INCIS

ACCS Intervention Cell

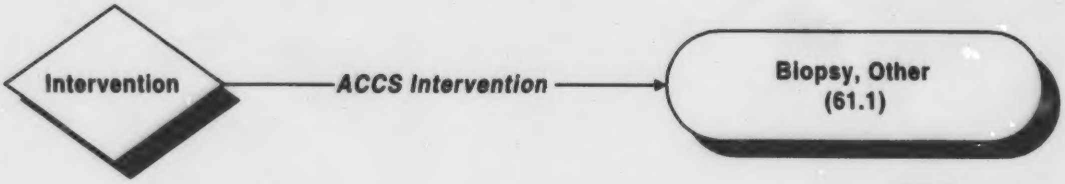


ACCS Grouper
09/98

ACCS CELL
60 Dental Surgery

ACCS Cell	ICD-9-CM Code	ICD-9-CM Description
60 DENTAL SURGERY	2301	EXTRACTION OF DECIDUOUS TOOTH
	2309	EXTRACTION OF OTHER TOOTH
	2311	REMOVAL OF RESIDUAL ROOT
	2319	OTHER SURGICAL EXTRACTION TOOTH
	232	RESTORATION OF TOOTH BY FILLING
	233	RESTORATION OF TOOTH BY INLAY
	2341	APPLICATION OF CROWN
	2349	OTHER DENTAL RESTORATION
	235	IMPLANTATION OF TOOTH
	236	PROSTHETIC DENTAL IMPLANT
	2370	ROOT CANAL NOS
	2371	ROOT CANAL THERAPY W IRRIGATION
	2372	ROOT CANAL THERAPY/APICOECTOMY
	2373	APICOECTOMY
	240	INCISION OF GUM/ALVEOLAR BONE
	2411	BIOPSY OF GUM
	2431	EXCISION LESION/TISSUE OF GUM
	244	EXCISION OF DENTAL LESION JAW
	245	ALVEOLOPLASTY
	246	EXPOSURE OF TOOTH
	247	APPLICATN ORTHODONTIC APPLIANCE
	248	OTHER ORTHODONTIC OPERATION
	2491	EXTENS/DEEPEN BUCCO/LING SULCUS
	2499	OTHER DENTAL OPERATIONS
	2732	WIDE EXCS/DESTR LES BONY PALATE
	9355	DENTAL WIRING
	9654	DENTAL SCALING/POLISHING/DEBRID
	9733	REMOVAL OF DENTAL WIRING

ACCS Intervention Cell

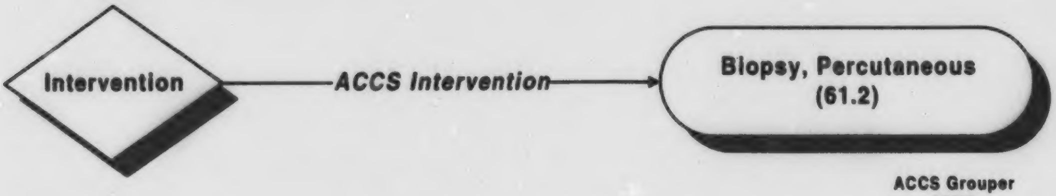


ACCS Grouper
09/98

ACCS CELL
61.1 Biopsy, Other

ACCS Cell	ICD-9-CM Code	ICD-9-CM Description
61.1 BIOPSY, OTHER	0716	BIOPSY OF THYMUS
	2212	OPEN BIOPSY OF NASAL SINUS
	2612	OPEN BIOPSY SALIVARY GLAND/DUCT
	2721	BIOPSY OF BONY PALATE
	2722	BIOPSY OF UVULA AND SOFT PALATE
	3404	INSERT INTERCOSTAL CATH DRAIN
	3423	BIOPSY OF CHEST WALL
	3424	PLEURAL BIOPSY
	411	PUNCTURE OF SPLEEN
	4131	BIOPSY OF BONE MARROW
	4191	ASPIR BONE MARROW DONOR-TRANSPL
	5201	DRAIN PANCREATIC CYST BY CATH
	6012	OPEN BIOPSY OF PROSTATE
	6212	OPEN BIOPSY OF TESTES
	7533	FETAL BLOOD SAMPLING AND BIOPSY
	8751	PERCUTAN HEPATIC CHOLANGIOGRAM
	8752	INTRAVENOUS CHOLANGIOGRAM
	8753	INTRAOPERATIVE CHOLANGIOGRAM
	8775	PERCUTANEOUS PYELOGRAM

ACCS Intervention Cell

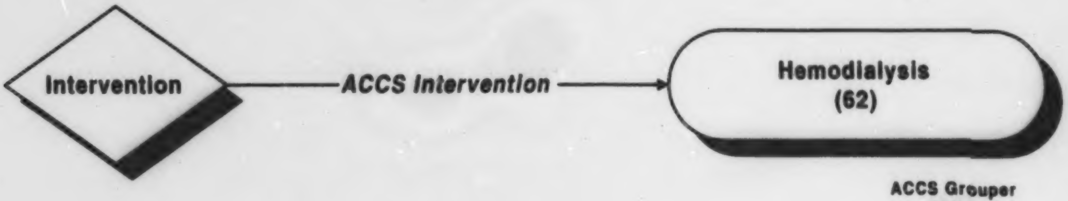


ACCS Grouper
09/98

ACCS CELL
61.2 Biopsy, Percutaneous

ACCS Cell	ICD-9-CM Code	ICD-9-CM Description
61.2 BIOPSY, PERCUTANEOUS	0601	ASPIRATION OF THYROID FIELD
	0611	CLOSED BIOPSY OF THYROID GLAND
	0711	CLOSED BIOPSY OF ADRENAL GLAND
	2211	CLOSED BIOPSY OF NASAL SINUS
	2611	CLOSED BIOPSY SALIVARY GL/DUCT
	3326	CL PERCUTANEOUS BIOPSY OF LUNG
	3491	THORACENTESIS
	370	PERICARDIOCENTESIS
	4132	CLOSED BIOPSY OF SPLEEN
	5011	CLOSED BIOPSY OF LIVER
	5091	PERCUTANEOUS ASPIRATION LIVER
	5211	CLOSED BIOPSY OF PANCREAS
	5491	PERCUTANEOUS ABDOMINAL DRAINAGE
	5523	CLOSED BIOPSY OF KIDNEY
	5592	PERCUTANEOUS ASPIRATION KIDNEY
	6011	CLOSED BIOPSY OF PROSTATE
	6091	PERCUTANEOUS ASPIRATN PROSTATE
	6211	CLOSED BIOPSY OF TESTES
	751	DIAGNOSTIC AMNIOCENTESIS
	8191	ARTHROCENTESIS
	8591	ASPIRATION OF BREAST

ACCS Intervention Cell

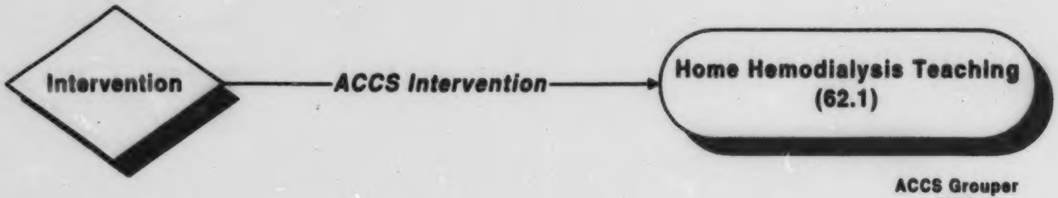

Intervention
ACCS Intervention
Hemodialysis
(62)

ACCS Grouper
09/98

ACCS CELL
62 Hemodialysis

ACCS Cell	ICD-9-CM Code	ICD-9-CM Description
62 HEMODIALYSIS	3995	HEMODIALYSIS

ACCS Intervention Cell

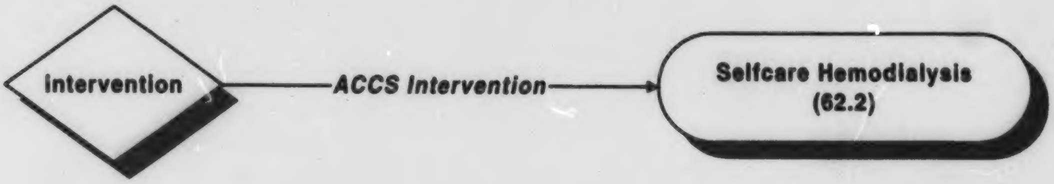

Intervention
ACCS Intervention
Home Hemodialysis Teaching (62.1)

**ACCS Grouper
09/98**

ACCS CELL
62.1 Home Hemodialysis Teaching

ACCS Cell	ACCS Code	ACCS Procedure Description
62.1 HOME HEMODIALYSIS TEACHING	399501	HOME HEMODIALYSIS TEACHING

ACCS Intervention Cell

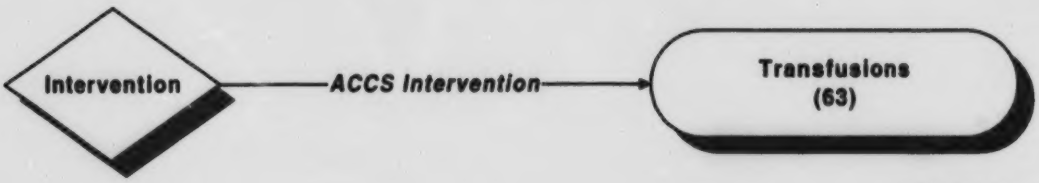

Intervention
ACCS Intervention
Selfcare Hemodialysis
(62.2)

ACCS Grouper
09/98

ACCS CELL
62.2 Selfcare Hemodialysis

ACCS Cell	ACCS Code	ACCS Procedure Description
62.2 SELFCARE HEMODIALYSIS	399502	SELFCARE HEMODIALYSIS

ACCS Intervention Cell

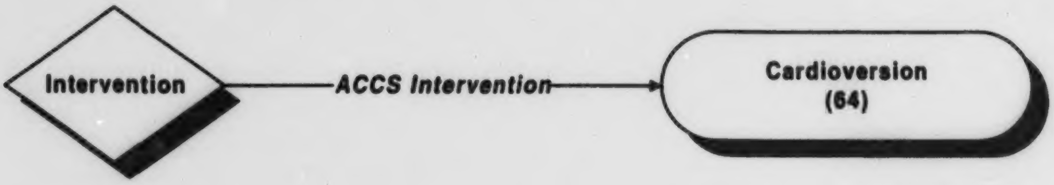


ACCS Grouper
09/98

ACCS CELL
63 Transfusions

ACCS Cell	ICD-9-CM Code	ICD-9-CM Description
63 TRANSFUSIONS	9900	PERIOP AUTO TRANS OF WHOLE BLOOD OR BLOOD COMP
	9901	EXCHANGE TRANSFUSION
	9902	AUTOTRANSFUSION OF WHOLE BLOOD
	9903	OTHER TRANSFUSION WHOLE BLOOD
	9904	TRANSFUSION PACKED CELLS
	9905	TRANSFUSION OF PLATELETS
	9906	TRANSFUSION COAGULATION FACTORS
	9907	TRANSFUSION OF OTHER SERUM
	9908	TRANSFUSION OF BLOOD EXPANDER
	9909	TRANSFUSION OF OTHER SUBSTANCE
	9918	INJECTION/INFUSION ELECTROLYTES
	9971	THERAPEUTIC PLASMAPHERESIS
	9972	THERAPEUTIC LEUKOPHERESIS
	9973	THERAPEUTIC ERYTHROCYTAPHERESIS
	9974	THERAPEUTIC PLATELETPHERESIS

ACCS Intervention Cell

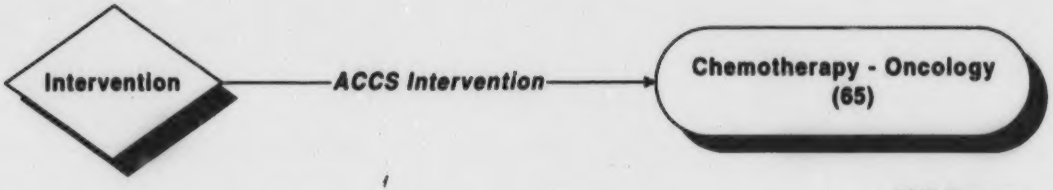

Intervention
ACCS Intervention
Cardioversion
(64)

ACCS Grouper
09/98

ACCS CELL
64 Cardioversion

ACCS Cell	ICD-9-CM Code	ICD-9-CM Description
64 CARDIOVERSION	9961	ATRIAL CARDIOVERSION
	9962	OTH ELECTRIC COUNTERSHOCK HEART

ACCS Intervention Cell

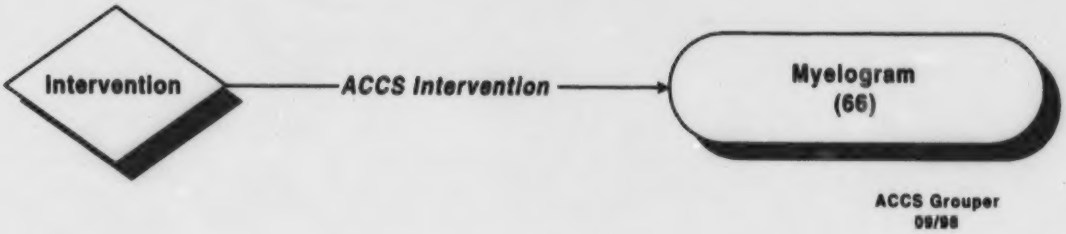

Intervention
ACCS Intervention
Chemotherapy - Oncology (65)

ACCS Grouper
04/00

ACCS CELL
65 Chemotherapy - Oncology

ACCS Cell	ICD-9-CM Code	ICD-9-CM Description
65 CHEMOTHERAPY- ONCOLOGY	9925	INJECTN/INFUSN CANCER CHEMO NEC

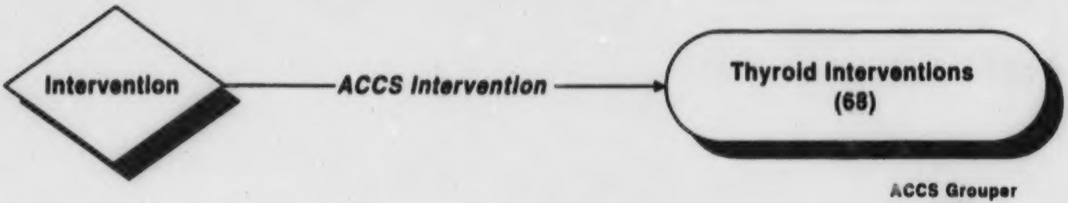
ACCS Intervention Cell


Intervention
ACCS Intervention
Myelogram
(66)
ACCS Grouper
09/98

ACCS CELL
66 Myelogram

ACCS Cell	ICD-9-CM Code	ICD-9-CM Description
66 MYELOGRAM	8721	CONTRAST MYELOGRAM

ACCS Intervention Cell

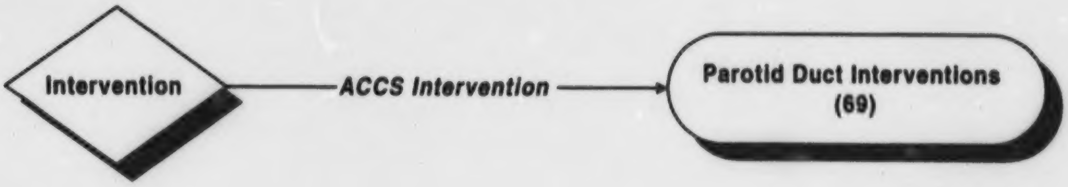

Intervention
ACCS Intervention
Thyroid Interventions
(68)

ACCS Grouper
09/98

ACCS CELL
68 Thyroid Interventions

ACCS Cell	ICD-9-CM Code	ICD-9-CM Description
68 THYROID INTERVENTIONS	0609	OTHER INCISION OF THYROID FIELD
	0613	BIOPSY OF PARATHYROID GLAND
	0631	EXCISION OF LESION OF THYROID
	067	EXCISN THYROGLOSSAL DUCT/TRACT

ACCS Intervention Cell

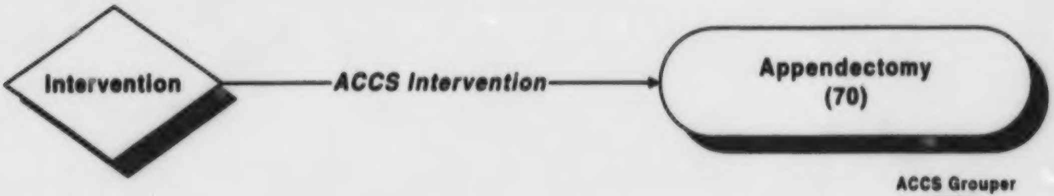

Intervention
ACCS Intervention
Parotid Duct Interventions (69)

ACCS Grouper
09/98

ACCS CELL
69 Parotid Duct Interventions

ACCS Cell	ICD-9-CM Code	ICD-9-CM Description
69 PAROTID DUCT INTERVENTIONS	2619	OTH DX PROC SALIVARY GLAND/DUCT
	2630	SIALOADENECTOMY NOS
	2631	PARTIAL SIALOADENECTOMY
	2632	COMPLETE SIALOADENECTOMY
	2649	OTH REPR/PLAST OP SALIV GL/DUCT
	2691	PROBING OF SALIVARY DUCT

ACCS Intervention Cell

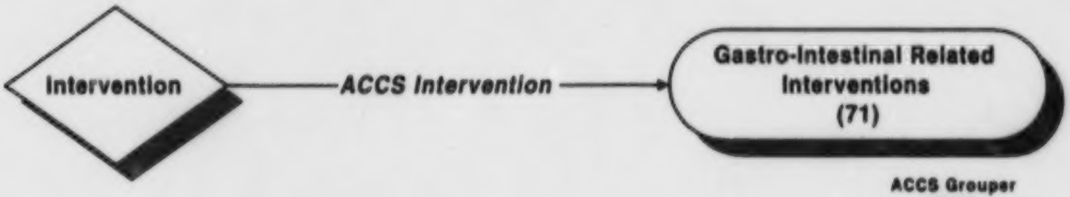

Intervention
ACCS Intervention
Appendectomy
(70)

ACCS Grouper
09/98

ACCS CELL
70 Appendectomy

ACCS Cell	ICD-9-CM Code	ICD-9-CM Description
70 APPENDECTOMY	4701	LAPAROSCOPIC APPENDECTOMY
	4709	OTHER APPENDECTOMY
	4719	OTHER INCIDENTAL APPENDECTOMY

ACCS Intervention Cell

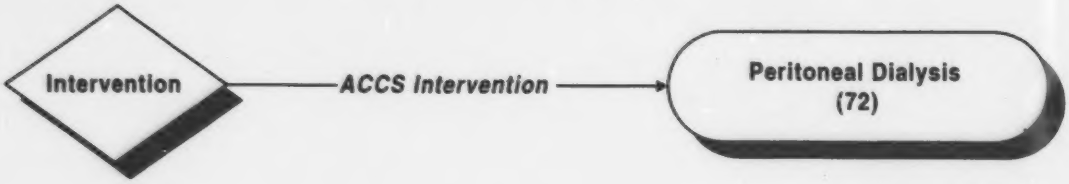

Intervention
ACCS Intervention
Gastro-Intestinal Related Interventions (71)

ACCS Grouper 09/98

ACCS CELL
71 Gastro-Intestinal Related Interventions

ACCS Cell	ICD-9-CM Code	ICD-9-CM Description
71 GASTRO-INTESTINAL RELATED INTERVENTIONS	893901	GI MOTILITY (ACCS CODE)
	9606	INSERTION OF SENGSTAKEN TUBE
	9607	INSERT OTH (NASO-)GASTRIC TUBE
	9624	DILATN/MANIP ENTEROSTOMY STOMA
	9701	REPLACE GASTRIC/ESOPHAGOST TUBE
	9703	REPLACE TUBE/DEV SMALL INTEST
	9751	REMOVAL OF GASTROSTOMY TUBE
	9752	REMOVAL TUBE FROM SMALL INTEST
	9759	REMOVAL OTHER DEV DIGEST SYSTEM

ACCS Intervention Cell

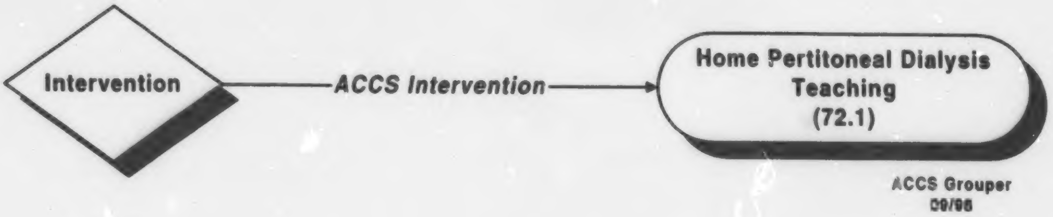

Intervention
ACCS Intervention
Peritoneal Dialysis
(72)

ACCS Grouper
09/98

ACCS CELL
72 Peritoneal Dialysis

ACCS Cell	ICD-9-CM Code	ICD-9-CM Description
72 PERITONEAL DIALYSIS	5498	PERITONEAL DIALYSIS

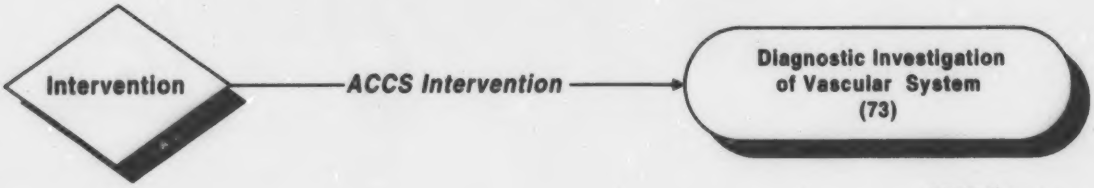
ACCS Intervention Cell


Intervention
ACCS Intervention
Home Pertitoneal Dialysis Teaching (72.1)
ACCS Grouper
09/98

ACCS CELL
72.1 Home Peritoneal Dialysis Teaching

ACCS Cell	ACCS Code	ACCS Procedure Description
72.1 HOME PERITONEAL DIALYSIS TEACHING	549801	HOME PERITONEAL DIALYSIS TEACHING

ACCS Intervention Cell

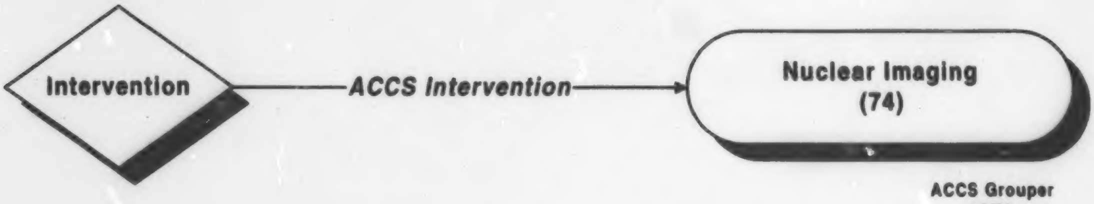

Intervention
ACCS Intervention
Diagnostic Investigation of Vascular System (73)

ACCS Grouper
04/00

ACCS CELL
73 Diagnostic Investigation of Vascular System

ACCS Cell	ICD-9-CM Code	ICD-9-CM Description
73 DIAGNOSTIC INVESTIGATION OF VASCULAR SYSTEM	8708	CERVICAL LYMPHANGIOGRAM
	8734	INTRATHORACIC LYMPHANGIOGRAM
	8804	ABDOMINAL LYMPHANGIOGRAM
	8834	LYMPHANGIOGRAM OF UPPER LIMB
	8836	LYMPHANGIOGRAM OF LOWER LIMB
	8846	ARTERIOGRAPHY OF PLACENTA

ACCS Intervention Cell

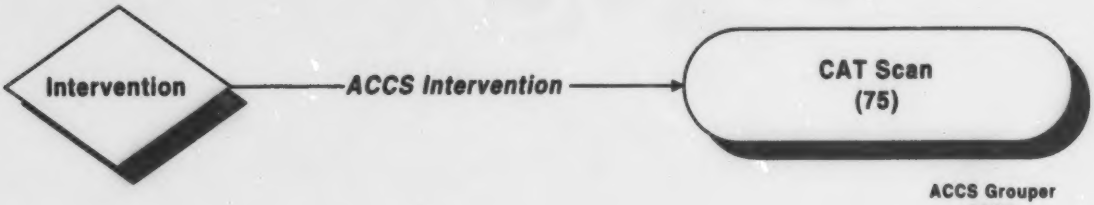


ACCS Grouper
09/98

ACCS CELL
74 Nuclear Imaging

ACCS Cell	ICD-9-CM Code	ICD-9-CM Description
74 NUCLEAR IMAGING	9201	THYROID SCAN AND FUNCTION STUDY
	9202	LIVER SCAN/RADIOIS FUNCT STUDY
	9203	RENAL SCAN/RADIOIS FUNCT STUDY
	9204	GI SCAN/RADIOISOTOPE FUNCT STUDY
	9205	CV/HEMAT SCAN/RADIOIS FUNCT STUDY
	9209	OTHER RADIOISOTOPE FUNCT STUDY
	9211	CEREBRAL RADIOISOTOPE SCAN
	9212	RADIOISOTOPE SCAN OTHER SITE HEAD
	9213	PARATHYROID RADIOSOTOPE SCAN
	9214	BONE RADIOISOTOPE SCAN
	9215	PULMONARY RADIOISOTOPE SCAN
	9216	RADIOISOTOPE SCAN LYMPHATIC SYS
	9217	PLACENTAL RADIOISOTOPE SCAN
	9218	TOTAL BODY RADIOISITOPE SCAN
	9219	RADIOISOTOPE SCAN OTHER SITES
	9516	P32/OTHER TRACER STUDIES OF EYE

ACCS Intervention Cell

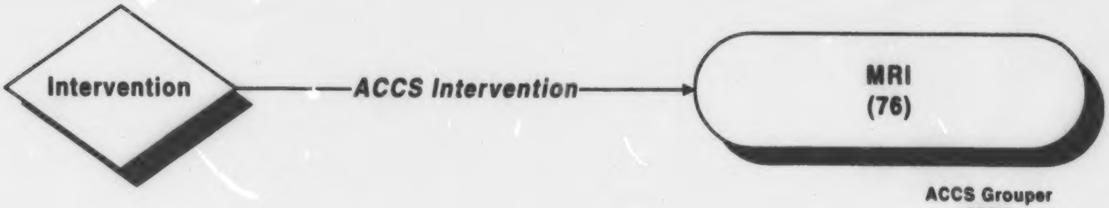


ACCS Grouper
09/98

ACCS CELL
75 CAT Scan

ACCS Cell	ICD-9-CM Code	ICD-9-CM Description
75 CAT SCAN	8704	OTHER TOMOGRAPHY OF HEAD
	8703	COMPUT AXIAL TOMOGRAPHY OF HEAD
	8741	COMPUT AXIAL TOMOGRAPHY THORAX
	8771	COMPUT AXIAL TOMOGRAPHY KIDNEY
	8801	COMPUT AXIAL TOMOGRAPHY ABDOMEN
	8838	OTHER COMPUT AXIAL TOMOGRAPHY

ACCS Intervention Cell

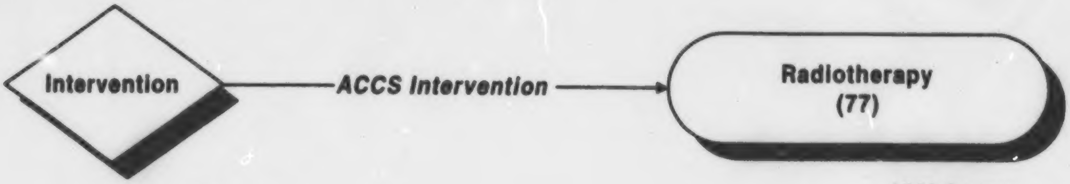


ACCS Grouper
09/98

ACCS CELL
76 MRI

ACCS Cell	ICD-9-CM Code	ICD-9-CM Description
76 MRI	8891	MRI OF BRAIN & BRAIN STEM
	8892	MRI OF CHEST AND MYOCARDIUM
	8893	MRI OF SPINAL CORD
	8894	MRI MUSKULOSKELETAL STRUCTURES
	8895	MRI OF PELVIS/PROSTATE/BLADDER
	8897	MRI OF OTHER/UNSPECIFIRED SITES
	8898	BONE MINERAL DENSITY STUDIES

ACCS Intervention Cell

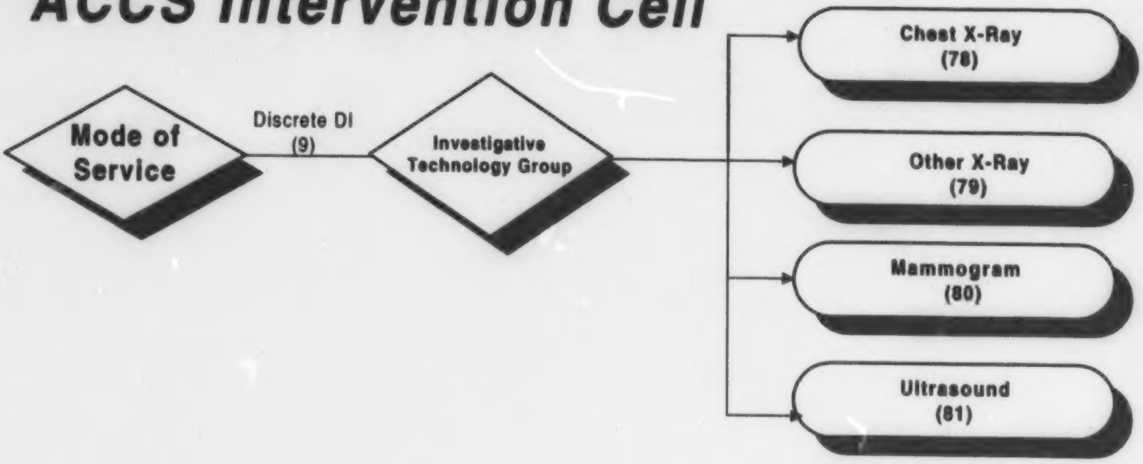


ACCS Grouper
09/98

ACCS CELL
77 Radiotherapy

ACCS Cell	ICD-9-CM Code	ICD-9-CM Description
77 RADIOTHERAPY	9221	SUPERFICIAL RADIATION
	9222	ORTHOVOLTAGE RADIATION
	9223	RADIOISOTOPIC TELERADIOTHERAPY
	9224	TELERADIOTHERAPY USING PHOTONS
	9225	TELERADIOTHERAPY USING ELECTRONS
	9226	TELERADIOTHER OTHER PARTIC RADIAT
	9227	IMPLANT/INSENT RADIOACTIVE ELEM
	9228	INJECTION/INSTILL RADIOISOTOPES
	9229	OTH RADIOTHERAPEUTIC PROCEDURE

ACCS Intervention Cell



ACCS Grouper
04/00

ACCS Cell	ICD-9-CM Code	ICD-9-CM Description
78 CHEST XRAY	8744	ROUTINE CHEST XRAY SO DESCRIBED

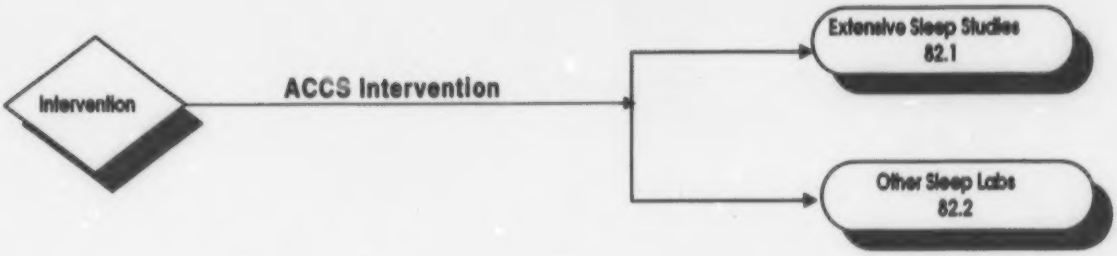
ACCS Cell	ICD-9-CM Code	ICD-9-CM Description
79 OTHER XRAY	8701	PNEUMOENCEPHALOGRAM
	8702	OTH CONTR RADIOGRAM BRAIN/SKULL
	8705	CONTRAST DACRYOCYSTOGRAM
	8706	CONTRAST RADIOGRAM NASOPHARYNX
	8707	CONTRAST LARYNGOGRAM
	8709	OTH SOFT TISS XRAY FACE/HD/NECK
	8713	TEMPOROMANDIB CONTR ARTHROGRAM
	8714	CONTRAST RADIOGRAM OF ORBIT
	8715	CONTRAST RADIOGRAM OF SINUS
	8716	OTHER XRAY OF FACIAL BONES
	8717	OTHER XRAY OF SKULL
	8722	OTHER XRAY OF CERVICAL SPINE
	8723	OTHER XRAY OF THORACIC SPINE
	8724	OTHER XRAY OF LUMBOSACRAL SPINE
	8729	OTHER XRAY OF SPINE
	8731	ENDOTRACHEAL BRONCHOGRAM
	8732	OTHER CONTRAST BRONCHOGRAM
	8733	MEDIASTINAL PNEUMOGRAM
	8738	SINOGRAM OF CHEST WALL
	8739	OTH SOFT TISSUE XRAY CHEST WALL
	8742	OTHER TOMOGRAPHY OF THORAX
	8743	XRAY OF RIBS/STERNUM/CLAVICLE
	8749	OTHER CHEST XRAY
	8754	OTHER CHOLANGIOGRAM
	8759	OTHER BILIARY TRACT XRAY
	8761	BARIUM SWALLOW
	8762	UPPER GI SERIES

ACCS Cell	ICD-9-CM Code	ICD-9-CM Description
79 OTHER XRAY	8763	SMALL BOWEL SERIES
	8764	LOWER GI SERIES
	8765	OTHER XRAY OF INTESTINE
	8769	OTHER DIGESTIVE TRACT XRAY
	8772	OTHER NEPHROTOMOGRAM
	8773	INTRAVENOUS PYELOGRAM
	8776	RETROGRADE CYSTOURETHROGRAM
	8777	OTHER CYSTOGRAM
	8778	ILEAL CONDUITOGRAM
	8779	OTHER XRAY OF URINARY SYSTEM
	8781	XRAY OF GRAVID UTERUS
	8782	GAS CONTR HYSTEROSALPINGOGRAM
	8783	OPAQUE DYE CONTR HYSTEROSALPING
	8784	PERCUTANEOUS HYSTEROGRAM
	8785	OTH XRAY FALLOPIAN TUBES/UTERUS
	8789	OTH XRAY FEMALE GENITAL ORGANS
	8791	CONTRAST SEMINAL VESICULOGRAM
	8792	OTH XRAY PROST/SEMINAL VESICLES
	8793	CONTRAST EPIDIDYMOGRAM
	8795	OTH XRAY EPIDIDYMIS/VAS DEFEREN
	8799	OTHER XRAY MALE GENITAL ORGANS
	8802	OTHER ABDOMINAL TOMOGRAPHY
	8803	SINOGRAM OF ABDOMINAL WALL
	8809	OTH SOFT TISSUE XRAY ABDOM WALL
	8811	PELV OPAQUE DYE CONTR RADIOGRAM
	8812	PELVIC GAS CONTRAST RADIOGRAPHY
	8813	OTHER PERITONEAL PNEUMOGRAM
	8814	RETROPERITONEAL FISTULOGRAM
	8815	RETROPERITONEAL PNEUMOGRAM
	8816	OTHER RETROPERITONEAL XRAY
	8819	OTHER XRAY OF ABDOMEN
	8821	SKELETAL XRAY SHOULDER/UPPER ARM
	8822	SKELETAL XRAY ELBOW AND FOREARM
	8823	SKELETAL XRAY OF WRIST AND HAND
	8824	SKELETAL XRAY OF UPPER LIMB NOS
	8825	PELVIMETRY
	8826	OTHER SKELETAL XRAY PELVIS/HIP
	8827	SKELET XRAY THIGH/KNEE/LOW LEG
	8828	SKELETAL XRAY OF ANKLE AND FOOT
	8829	SKELETAL XRAY OF LOWER LIMB NOS
	8831	SKELETAL SERIES
	8832	CONTRAST ARTHROGRAM
	8833	OTHER SKELETAL XRAY
	8835	OTH SOFT TISSUE XRAY UPPER LIMB
	8837	OTH SOFT TISSUE XRAY LOWER LIMB
	8839	OTHER AND UNSPECIFIED
	883901	GENERIC INVEST TECH CODE
	9512	FLUOR ANGIOGRAPHY/ANGIOSCPY EYE
	9514	XRAY STUDY OF EYE

ACCS Cell	ICD-9-CM Code	ICD-9-CM Description
80 MAMMMOGRAM	8735	CONTRAST RADIOGRAM MAMMARY DUCT
	8736	XEROGRAPHY OF BREAST
	8737	OTHER MAMMOGRAPHY

ACCS Cell	ICD-9-CM Code	ICD-9-CM Description
81 ULTRASOUND	8871	DIAGNOSTIC ULTRASOUND HEAD/NECK
	8873	DX ULTRASOUND OTH SITES THORAX
	8874	DX ULTRASOUND DIGESTIVE SYSTEM
	8875	DX ULTRASOUND URINARY SYSTEM
	8876	DX ULTRASOUND ABDOMEN/RETROPER
	8877	DX ULTRASOUND PERIPH VASCU SYS
	8878	DX ULTRASOUND OF GRAVID UTERUS
	8879	OTHER DIAGNOSTIC ULTRASOUND
	9513	ULTRASOUND STUDY OF EYE

ACCS Intervention Cell

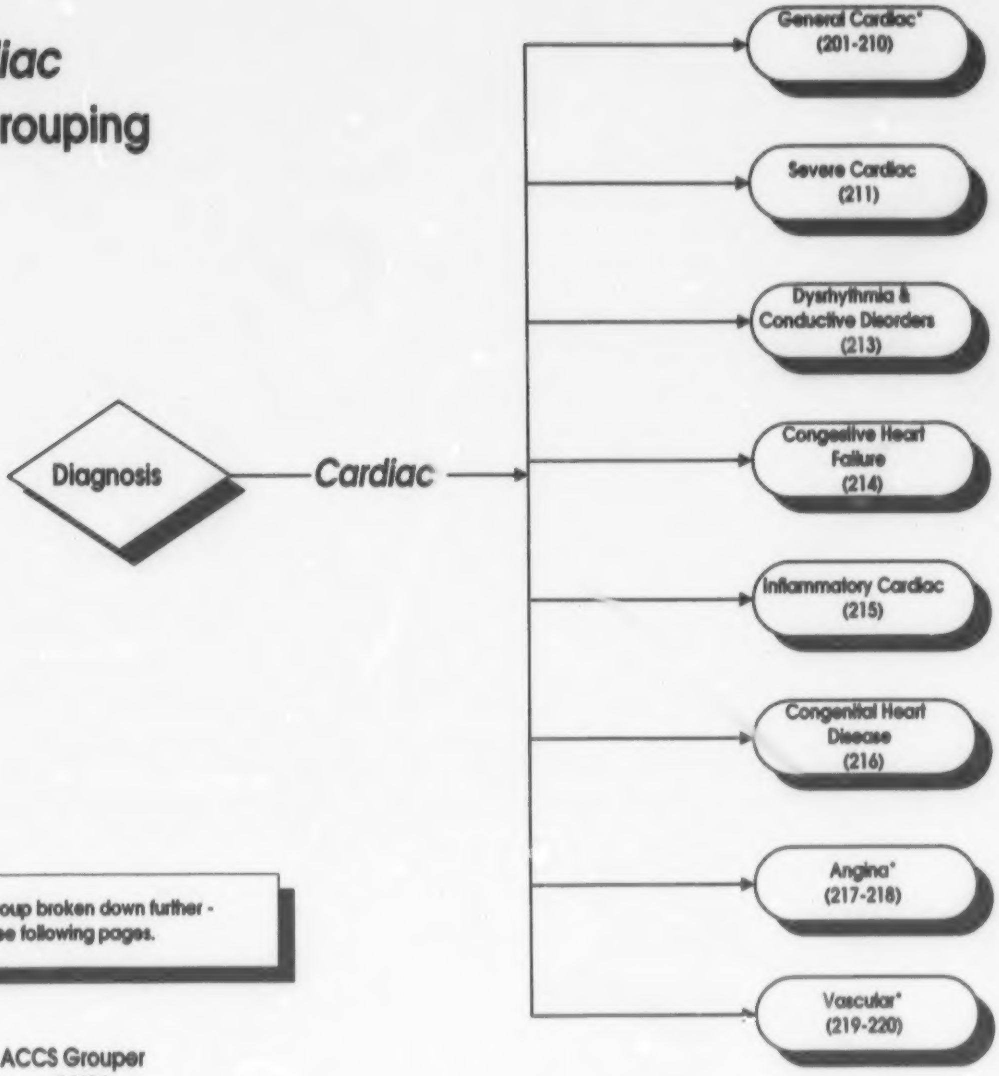

Intervention
ACCS Intervention
Extensive Sleep Studies
82.1
Other Sleep Labs
82.2

ACCS Grouper
04/00

ACCS Cell	ICD-9-CM Code	ICD-9-CM Description
82.1 EXTENSIVE SLEEP STUDIES	8917	POLYSOMMOGRAM

ACCS Cell	ICD-9-CM Code	ICD-9-CM Description
82.2 OTHER SLEEP LABS	8918	OTHER SLEEP DISORDER FUNCTION TESTS
	9390	CONTINUOUS POSITIVE AIRWAY PRESSURE [CPAP]

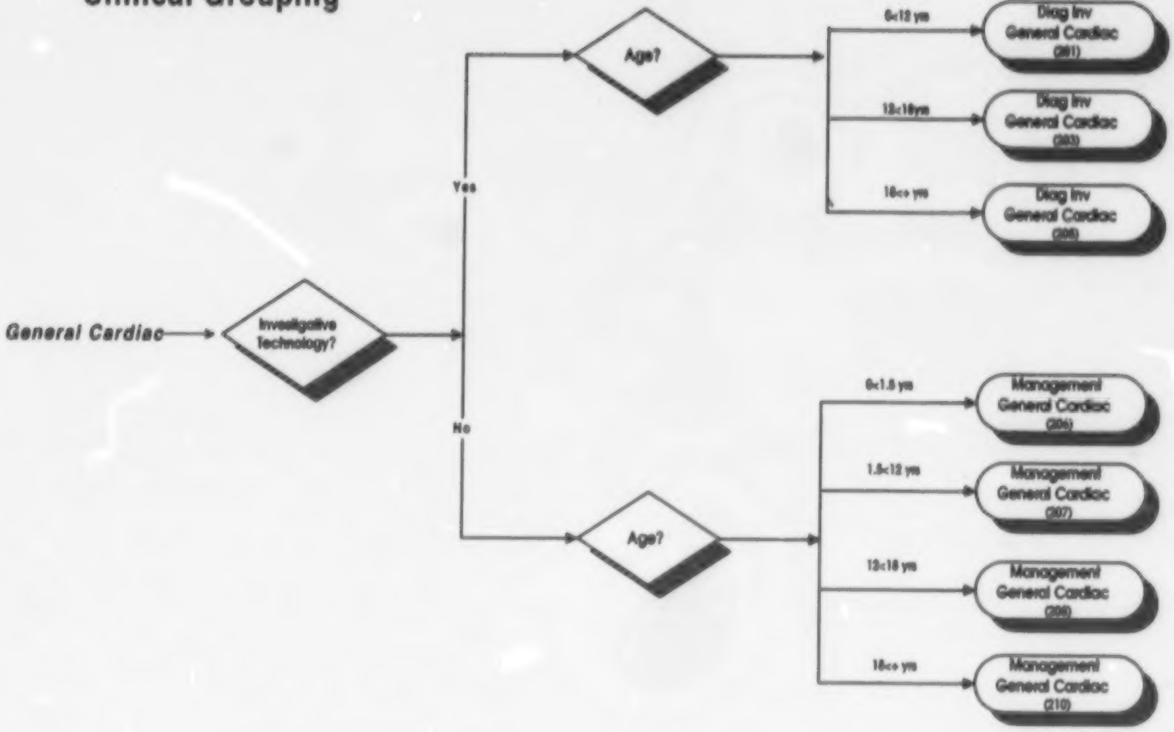
Cardiac
Clinical Grouping


Diagnosis
Cardiac
General Cardiac*
(201-210)
Severe Cardiac
(211)
Dysrhythmia &
Conductive Disorders
(213)
Congestive Heart
Failure
(214)
Inflammatory Cardiac
(215)
Congenital Heart
Disease
(216)
Angina*
(217-218)
Vascular*
(219-220)

*Clinical Group broken down further -
see following pages.

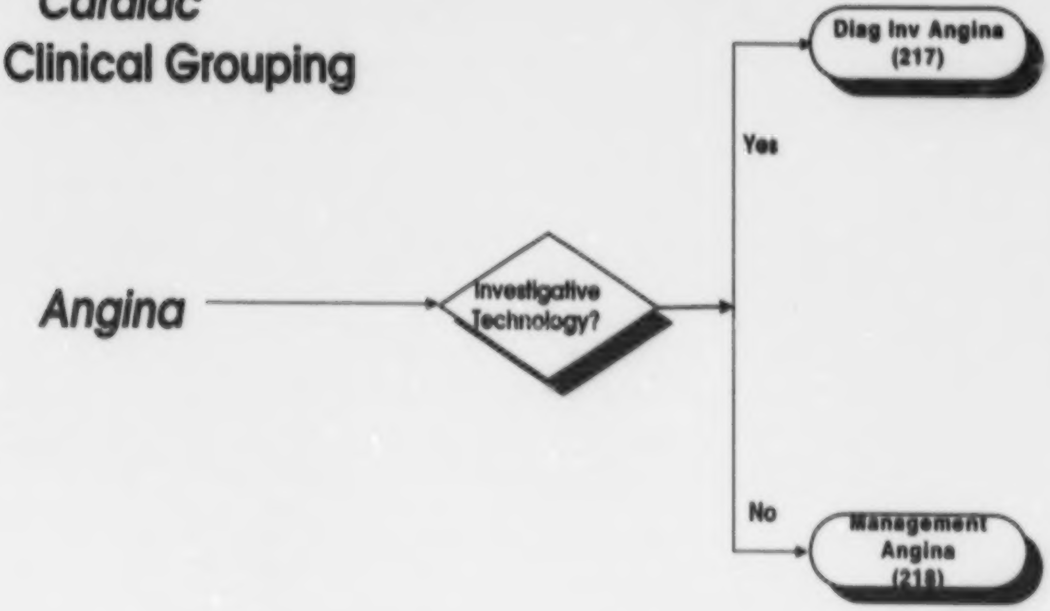
ACCS Grouper
04/96

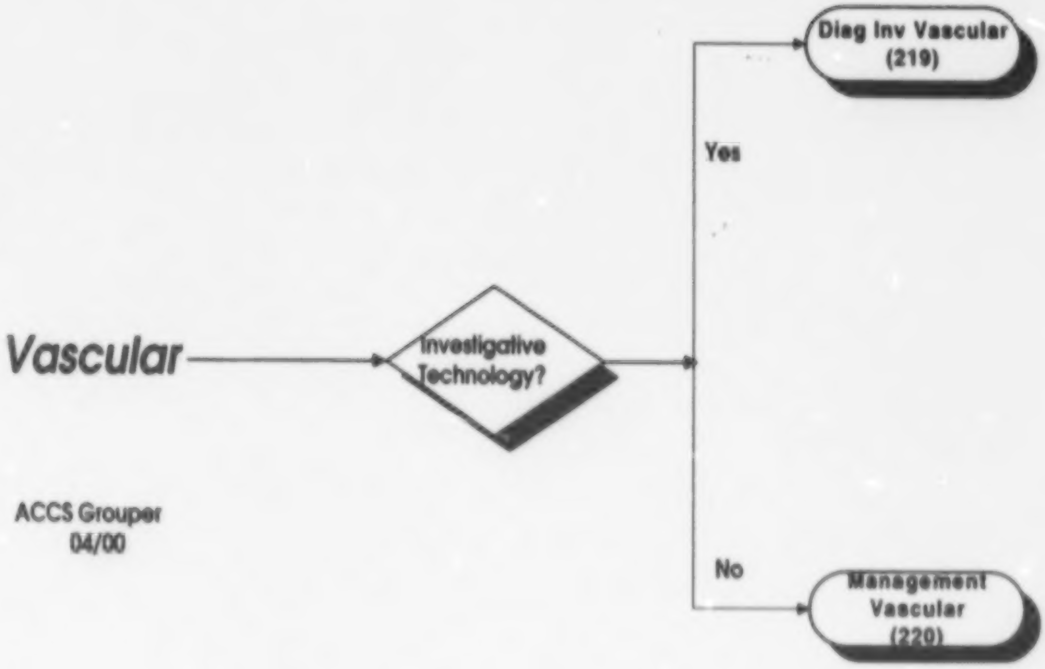
Cardiac
Clinical Grouping


General Cardiac
Investigative Technology?
Yes
No
Age?
0<12 yrs
Diag Inv General Cardiac (201)
12<18yrs
Diag Inv General Cardiac (203)
18<+ yrs
Diag Inv General Cardiac (205)
Age?
0<1.5 yrs
Management General Cardiac (206)
1.5<12 yrs
Management General Cardiac (207)
12<18 yrs
Management General Cardiac (208)
18<+ yrs
Management General Cardiac (210)

ACCS Grouper
04/96

Cardiac
Clinical Grouping


Angina
Investigative Technology?
Yes
Diag Inv Angina (217)
No
Management Angina (218)


Vascular
Investigative Technology?
Yes
Diag Inv Vascular (219)
No
Management Vascular (220)

ACCS Grouper
04/00

201-210 General Cardiac

ACCS Cell	ICD-9-CM Code	ICD-9-CM Description
201-210 DIAG INV & MANAGEMENT GENERAL CARDIAC		
	0860	CHAGAS'S DIS W HEART INVOLV
	2127	BENIGN NEOPLASM OF HEART
	22800	HEMANGIOMA OF UNSPECIFIED SITE
	22809	HEMANGIOMA OF OTHER SITES
	3062	CARDIOVASC MALFUNCT MENTAL FACT
	3940	MITRAL STENOSIS
	3941	RHEUMATIC MITRAL INSUFFICIENCY
	3942	MITRAL STENOSIS W INSUFFICIENCY
	3949	OTH/UNSPEC DISEASE MITRAL VALVE
	3950	RHEUMATIC AORTIC STENOSIS
	3951	RHEUMATIC AORTIC INSUFFICIENCY
	3952	RHEUMAT AORTIC STENOS W INSUFF
	3959	OTH/UNSPEC RHEUMAT AORTIC DIS
	3960	MITRAL AND AORTIC VALVE STENOS
	3961	MITRAL STENOSIS/AORTIC INSUFF
	3962	MITRAL INSUFF/AORTIC STENOSIS
	3963	MITRAL AND AORTIC VALVE INSUFF
	3968	MULT INVOLV MITRAL/AORTIC VALVE
	3969	MITRAL/AORTIC VALVE DIS UNSPEC
	3970	DISEASES OF TRICUSPID VALVE
	3971	RHEUMATIC DIS PULMONARY VALVE
	3979	RHEUMAT DIS ENDOCARD VALVE NOS
	39890	RHEUMATIC HEART DISEASE UNSPEC
	39899	OTHER RHEUMATIC HEART DISEASES
	4010	MALIGNANT ESSENTIAL HYPERTENS
	4011	BENIGN ESSENTIAL HYPERTENSION
	4019	ESSENTIAL HYPERTENSION UNSPEC
	40200	MAL HYPERTENS HEART DIS NO CHF
	40210	BEN HYPERTENS HEART DIS NO CHF
	40290	HYPERTENS HEART DIS NOS NO CHF
	40300	MAL HYPERTENS RENAL DIS NO RF
	40310	BEN HYPERTENS RENAL DIS NO RF
	40390	HYPERTENS RENAL DIS NOS NO RF
	40400	MAL HYPER HRT/REN DIS NO CHF/RF
	40410	BEN HYPER HRT/REN DIS NO CHF/RF
	40490	HYPER HRT/REN DIS NOS NO CHF/RF
	40501	MAL SECOND HYPERTENS RENOVASC
	40509	OTH MAL SECONDARY HYPERTENSION
	40511	BEN SECOND HYPERTENS RENOVASC
	40519	OTH BEN SECONDARY HYPERTENSION
	40591	SECOND HYPERTENS NOS RENOVASC
	40599	OTH SECONDARY HYPERTENSION NOS
	41410	ANEURYSM OF HEART (WALL)
	41411	ANEURYSM OF CORONARY VESSELS
	41419	OTHER ANEURYSM OF HEART
	4150	ACUTE COR PULMONALE
	4160	PRIMARY PULMONARY HYPERTENSION
	4161	KYPHOSCOLIOTIC HEART DISEASE
	4168	OTH CHRONIC PULMONARY HEART DIS
	4169	CHR PULMONARY HEART DIS UNSPEC
	4230	HEMOPERICARDIUM
	4238	OTHER SPEC DISEASES PERICARDIUM
	4239	UNSPEC DISEASE OF PERICARDIUM
	4240	MITRAL VALVE DISORDERS
	4241	AORTIC VALVE DISORDERS

ACCS Cell	ICD-9-CM Code	ICD-9-CM Description
201-210 DIAG INV & MANAGEMENT GENERAL CARDIAC		
	4242	TRICUSPID VALVE DISORD NONRHEUM
	4243	PULMONARY VALVE DISORDERS
	4250	ENDOMYOCARDIAL FIBROSIS
	4251	HYPERTROPH OBSTRUCT CARDIOMYOP
	4252	OBSCURE CARDIOMYOPATHY AFRICA
	4253	ENDOCARDIAL FIBROELASTOSIS
	4254	OTHER PRIMARY CARDIOMYOPATHIES
	4255	ALCOHOLIC CARDIOMYOPATHY
	4257	NUTRITIONAL/MET CARDIOMYOPATHY
	4258	CARDIOMYOPATHY IN OTHER DIS EC
	4259	SECONDARY CARDIOMYOPATHY UNSPEC
	4291	MYOCARDIAL DEGENERATION
	4292	CARDIOVASCULAR DISEASE UNSPEC
	4293	CARDIOMEGALY
	4294	FUNCT DISTURB FOLL CARDIAC SURG
	4295	RUPTURE OF CHORDAE TENDINAE
	4296	RUPTURE OF PAPILLARY MUSCLE
	42971	ACQUIRED CARDIAC SEPTAL DEFECT
	42979	OTH SEQUEL MYOCARD INFARCT NEC
	42981	OTH DISORDERS PAPILLARY MUSCLE
	42982	HYPERKINETIC HEART DISEASE
	42989	OTH ILL-DEFINED HEART DISEASE
	4299	HEART DISEASE UNSPECIFIED
	4580	ORTHOSTATIC HYPOTENSION
	4581	CHRONIC HYPOTENSION
	4582	IATROGENIC HYPOTENSION
	4588	OTHER SPECIFIED HYPOTENSION
	4589	UNSPECIFIED HYPOTENSION
	7825	CYANOSIS
	7852	UNDIAGNOSED CARDIAC MURMURS
	7853	OTHER ABNORMAL HEART SOUNDS
	7859	OTH SYMPT CARDIOVASCULAR SYSTEM
	78602	ORTHOPNEA
	78650	CHEST PAIN UNSPECIFIED
	78651	PRECORDIAL PAIN
	7962	ELEVATED BLOOD PRESS READ NO DX
	7963	NONSPEC LOW BLOOD PRESSURE READ
	99600	MECH COMPL CARD DEV/IMP/GRF NOS
	99602	MECH COMPL HEART VALVE PROSTH
	99603	MECH COMPL CORONARY BYPASS GRF
	99609	MECH COMPL OTH CARD DEV/IMP/GRF
	9961	MECH COMPL VASC DEV/IMPL/GRAFT
	99661	INFECT/INFLAM CARD DEV/IMPL/GRF
	99662	INFECT/INFLAM VASC DEV/IMPL/GRF
	99671	OTHER COMPL HEART VALVE PROSTH
	99672	OTH COMPL CARDIAC DEV/IMPL/GRF
	99673	OTH COMPL REN DIAL DEV/IMPL/GRF
	99683	COMPLICATION TRANSPLANTED HEART
	9971	CARDIAC COMPLICATIONS
	99791	HYPERTENSION
	V421	HEART REPLACED BY TRANSPLANT
	V422	HEART VALVE REPLACED TRANSPLANT
	V432	HEART REPLACED BY OTHER MEANS
	V433	HEART VALVE REPLACED OTH MEANS
	V434	BLOOD VESSEL REPLACED OTH MEANS
	V472	OTH CARDIORESPIRATORY PROBLEMS
	V5331	FIT/ADJUST CARDIAC PACEMAKER

ACCS Cell	ICD-9-CM Code	ICD-9-CM Description
201-210 DIAG INV & MANAGEMENT GENERAL CARDIAC		
	V5332	FIT/ADJUST IMPLANT CARD DEFIB
	V5339	FIT/ADJUST OTHER CARDIAC DEVICE
	V717	OBSERV SUSPECTED CARDIOVASC DIS
	V812	SPEC SCREEN OTH/NOS CARDIOVASC

ACCS CELL
213 Dysrythmia & Conductive Disorders

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
213 DYSRHYTHMIA & CONDUCTIVE DISORDERS		
	4260	ATRIOVENTRICULAR BLOCK COMPLETE
	42610	ATRIOVENTRICULAR BLOCK UNSPEC
	42611	FIRST DEGREE ATRIOVENT BLOCK
	42612	MOBITZ(TYPE) II ATRIOVENT BLOCK
	42613	OTH SEC DEGREE ATRIOVENT BLOCK
	4262	LEFT BUNDLE BRANCH HEMIBLOCK
	4263	OTHER LEFT BUNDLE BRANCH BLOCK
	4264	RIGHT BUNDLE BRANCH BLOCK
	42650	BUNDLE BRANCH BLOCK UNSPECIFIED
	42651	RBBB/LEFT POST FASCICULAR BLOCK
	42652	RBBB/LEFT ANT FASCICULAR BLOCK
	42653	OTHER BILAT BUNDLE BRANCH BLOCK
	42654	TRIFASCICULAR BLOCK
	4266	OTHER HEART BLOCK
	4267	ANOMALOUS ATRIOVENT EXCITATION
	42681	LOWN-GANONG-LEVINE SYNDROME
	42689	OTHER SPEC CONDUCTION DISORDERS
	4269	UNSPECIFIED CONDUCTION DISORDER
	4270	PAROXYSML SUPRAVENT TACHYCARDIA
	4271	PAROXYSMAL VENT TACHYCARDIA
	4272	PAROXYSMAL TACHYCARDIA UNSPEC
	42731	ATRIAL FIBRILLATION
	42732	ATRIAL FLUTTER
	42741	VENTRICULAR FIBRILLATION
	42742	VENTRICULAR FLUTTER
	42760	PREMATURE BEATS UNSPECIFIED
	42761	SUPRAVENTRICULR PREMATURE BEATS
	42769	OTHER PREMATURE BEATS
	42781	SINOATRIAL NODE DYSFUNCTION
	42789	OTHER SPEC CARDIAC DYSRHYTHMIAS
	4279	UNSPECIFIED CARDIAC DYSRHYTHMIA
	7850	TACHYCARDIA UNSPECIFIED
	7851	PALPITATIONS
	99601	MECH COMPL CARDIAC PACEMAKER
	99604	COMPL AUTOMAT IMPLANT CAR DEFIB

ACCS CELL
214 Congestive Heart Failure

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
214 CONGESTIVE HEART FAILURE		
	39891	RHEUMAT HEART FAILURE (CONGEST)
	40201	MAL HYPERTENS HEART DIS W CHF
	40211	BEN HYPERTENS HEART DIS W CHF
	40291	HYPERTENS HEART DIS NOS W CHF
	40401	MAL HYPERTENS HRT/REN DIS W CHF
	40403	MAL HYPER HRT/REN DIS W CHF/RF
	40411	BEN HYPERTENS HRT/REN DIS W CHF
	40413	BEN HYPER HRT/REN DIS W CHF/RF
	40491	HYPERTENS HRT/REN DIS NOS W CHF
	40493	HYPER HRT/REN DIS NOS W CHF/RF
	4280	CONGESTIVE HEART FAILURE
	4281	LEFT HEART FAILURE
	4289	UNSPECIFIED HEART FAILURE

ACCS CELL
215 Inflammatory Cardiac

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
215 INFLAMMATORY CARDIAC		
	03282	DIPHTHERITIC MYOCARDITIS
	03640	UNSPEC MENINGOCOCCAL CARDITIS
	03641	MENINGOCOCCAL PERICARDITIS
	03642	MENINGOCOCCAL ENDOCARDITIS
	03643	MENINGOCOCCAL MYOCARDITIS
	07420	COXSACKIE CARDITIS UNSPEC
	07421	COXSACKIE PERICARDITIS
	07422	COXSACKIE ENDOCARDITIS
	07423	COXSACKIE MYOCARDITIS
	0930	SYPHILITIC ANEURYSM AORTA
	0931	SYPHILITIC AORTITIS
	09320	SYPH ENDOCARDITIS VALVE UNSPEC
	09321	SYPH ENDOCARDITIS MITRAL VALVE
	09322	SYPH ENDOCARDITIS AORTIC VALVE
	09323	SYPH ENDOCARD TRICUSPID VALVE
	09324	SYPH ENDOCARD PULMONARY VALVE
	09381	SYPHILITIC PERICARDITIS
	09382	SYPHILITIC MYOCARDITIS
	09389	OTHER CARDIOVASCULAR SYPHILIS
	0939	UNSPECIFIED CARDIOVASCULAR SYPH
	09883	GONOCOCCAL PERICARDITIS
	09884	GONOCOCCAL ENDOCARDITIS
	09885	OTHER GONOCOCCAL HEART DISEASE
	11281	CANDIDAL ENDOCARDITIS
	11503	HISTOPLASMA CAPSULATUM PERICARD
	11504	HISTOPLASMA CAPSULATUM ENDOCARD
	11513	HISTOPLASMA DUBOISII PERICARD
	11514	HISTOPLASMA DUBOISII ENDOCARD
	11593	UNSPEC HISTOPLASMOSIS PERICARD
	11594	UNSPEC HISTOPLASMOSIS ENDOCARD
	1303	TOXOPLASMOSIS MYOCARDITIS
	3910	ACUTE RHEUMATIC PERICARDITIS
	3911	ACUTE RHEUMATIC ENDOCARDITIS

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
215 INFLAMMATORY CARDIAC		
	3912	ACUTE RHEUMATIC MYOCARDITIS
	3918	OTHER ACUTE RHEUMATIC HEART DIS
	3919	ACUTE RHEUMATIC HEART DIS NOS
	3920	RHEUMATIC CHOREA W HEART INVOLV
	3929	RHEUMATIC CHOREA NO HRT INVOLV
	393	CHRONIC RHEUMATIC PERICARDITIS
	3980	RHEUMATIC MYOCARDITIS
	4200	AC PERICARDITIS IN DISEASES EC
	42090	ACUTE PERICARDITIS UNSPECIFIED
	42091	ACUTE IDIOPATHIC PERICARDITIS
	42099	OTHER ACUTE PERICARDITIS
	4210	AC/SUBAC BACTERIAL ENDOCARDITIS
	4211	AC/SUBAC INFECT ENDOCARD DIS EC
	4219	ACUTE ENDOCARDITIS UNSPECIFIED
	4220	ACUTE MYOCARDITIS IN DISEASE EC
	42290	ACUTE MYOCARDITIS UNSPECIFIED
	42291	IDIOPATHIC MYOCARDITIS
	42292	SEPTIC MYOCARDITIS
	42293	TOXIC MYOCARDITIS
	42299	OTHER ACUTE MYOCARDITIS
	4231	ADHESIVE PERICARDITIS
	4232	CONSTRICTIVE PERICARDITIS
	42490	ENDOCARD VALVE UNSPEC CAUSE NOS
	42491	ENDOCARDITIS IN DISEASES EC
	42499	OTHER ENDOCARDITIS VALVE UNSPEC
	4290	MYOCARDITIS UNSPECIFIED

ACCS CELL
216 Congenital Heart Disease

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
216 CONGENITAL HEART DISEASE		
	7450	COMMON TRUNCUS
	74510	COMPLETE TRANSPOS GREAT VESSELS
	74511	DOUBLE OUTLET RIGHT VENTRICLE
	74512	CORRECTED TRANSPOS GREAT VESSLS
	74519	OTH TRANSPOSITION GREAT VESSELS
	7452	TETRALOGY OF FALLOT
	7453	COMMON VENTRICLE
	7454	VENTRICULAR SEPTAL DEFECT
	7455	OSTIUM SECUNDUM ATRIAL SEPT DEF
	74560	ENDOCARDIAL CUSHION DEFECT NOS
	74561	OSTIUM PRIMUM DEFECT
	74569	OTH ENDOCARDIAL CUSHION DEFECTS
	7457	COR BILOCULARE
	7458	OTH ANOM CARDIAC SEPTAL CLOSURE
	7459	UNSPEC DEFECT OF SEPTAL CLOSURE
	74600	PULMONARY VALVE ANOMALY UNSPEC
	74601	PULMONARY VALVE ATRESIA CONGEN
	74602	PULMONARY VALVE STENOSIS CONGEN
	74609	OTH ANOMALIES PULMONARY VALVE
	7461	TRICUSPID ATRESIA/STENOS CONGEN
	7462	EBSTEIN'S ANOMALY
	7463	CONGENITAL STENOS AORTIC VALVE
	7464	CONGEN INSUFFICIENCY AORT VALVE
	7465	CONGENITAL MITRAL STENOSIS
	7466	CONGENITAL MITRAL INSUFFICIENCY
	7467	HYPOPLASTIC LEFT HEART SYNDROME
	74681	SUBAORTIC STENOSIS
	74682	COR TRIATRIATUM
	74683	INFUNDIBULAR PULMONIC STENOSIS
	74684	OBSTRUCTIVE ANOMALIES HEART NEC
	74685	CORONARY ARTERY ANOMALY
	74686	CONGENITAL HEART BLOCK
	74687	MALPOSITION HEART/CARDIAC APEX
	74689	OTHER SPECIFIED ANOMALIES HEART
	7469	UNSPECIFIED ANOMALY OF HEART

ACCS CELL
217-218 Angina

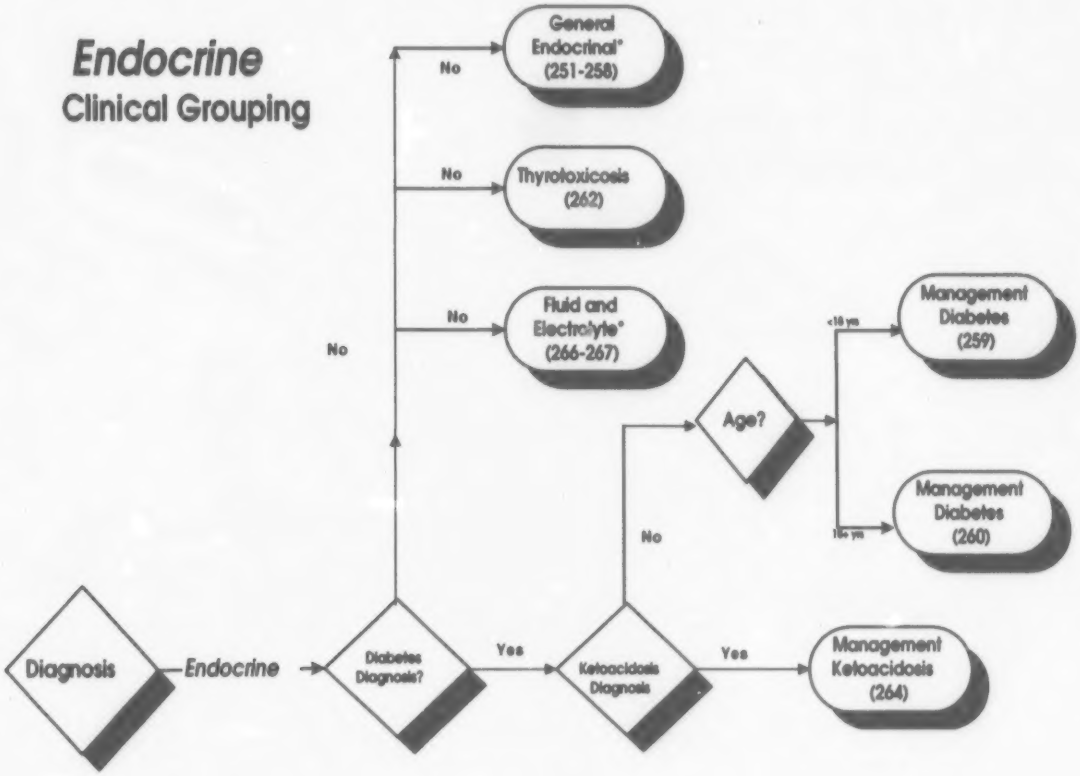
ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
217-218 DIAG INV & MANAGEMENT ANGINA		
	41000	AMI ANTEROLAT WALL EPISODE NOS
	41001	AMI ANTEROLAT WALL INIT EPISODE
	41002	AMI ANTEROLAT WALL SUBSEQ EP
	41010	AMI OTH ANT WALL EPISODE UNSPEC
	41011	AMI OTH ANT WALL INIT EPISODE
	41012	AMI OTH ANT WALL SUBSEQ EPISODE
	41020	AMI INFEROLAT WALL EPISODE NOS
	41021	AMI INFEROLAT WALL INIT EPISODE
	41022	AMI INFEROLAT WALL SUBSEQ EP
	41030	AMI INFEROPOST WALL EPISODE NOS
	41031	AMI INFEROPOST WALL INIT EP
	41032	AMI INFEROPOST WALL SUBSEQ EP
	41040	AMI OTH INFER WALL EPISODE NOS
	41041	AMI OTH INFER WALL INIT EPISODE
	41042	AMI OTH INFER WALL SUBSEQ EP
	41050	AMI OTH LAT WALL EPISODE UNSPEC
	41051	AMI OTH LAT WALL INIT EPISODE
	41052	AMI OTH LAT WALL SUBSEQ EPISODE
	41060	TRUE POST WALL AMI EPISODE NOS
	41061	TRUE POST WALL AMI INIT EPISODE
	41062	TRUE POST WALL AMI SUBSEQ EP
	41070	SUBENDOCARDIAL AMI EPISODE NOS
	41071	SUBENDOCARDIAL AMI INIT EPISODE
	41072	SUBENDOCARDIAL AMI SUBSEQ EP
	41080	AMI OTH SPEC SITE EPISODE NOS
	41081	AMI OTH SPEC SITE INIT EPISODE
	41082	AMI OTH SPEC SITE SUBSEQ EP
	41090	AMI UNSPEC SITE EPISODE UNSPEC
	41091	AMI UNSPEC SITE INITIAL EPISODE
	41092	AMI UNSPEC SITE SUBSEQ EPISODE
	4110	POSTMYOCARDIAL INFARCTION SYND
	4111	INTERMEDIATE CORONARY SYNDROME
	41181	CORONARY OCCLUSION WITHOUT MI
	41189	OTH AC/SUBAC ISCHEMIC HEART DIS
	412	OLD MYOCARDIAL INFARCTION
	4130	ANGINA DECUBITUS
	4131	PRINZMETAL ANGINA
	4139	OTHER/UNSPEC ANGINA PECTORIS
	41400	COR ATHEROSCLEROSIS UNS VESSEL
	41401	COR ATHEROSCLER NATIV COR VESS
	41402	COR ATHERO AUTOLOGOUS VEIN BYP
	41403	COR ATHERO NONAUTOL BIO BYPASS
	41404	COR ATHERO OF ARTERY BYPASS GRAFT
	41405	COR ATHERO OF UNSPEC TYPE OF BYPASS
	4148	OTH SPEC CHR ISCHEMIC HEART DIS
	4149	UNSPEC CHR ISCHEMIC HEART DIS
	4275	CARDIAC ARREST
	78551	CARDIOGENIC SHOCK

ACCS CELL
219-220 Vascular

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
219-220 DIAG INV & MANAGEMENT VASCULAR		
	25070	DIABETES W CIRC DISORD TYPE II
	25071	DIABETES W CIRC DISORD TYPE I
	4170	ARTERIOVENOUS FIST PULM VESSELS
	4171	ANEURYSM OF PULMONARY ARTERY
	4178	OTHER SPEC DIS PULMONARY CIRC
	4179	DIS PULMONARY CIRCULATION NOS
	4400	ATHEROSCLEROSIS OF AORTA
	44020	ATHEROSCLER NATIVE ART EXT UNS
	44021	ATHEROSCLER NATIVE ART EXT W IC
	44022	ATHERO NATIVE ART EXT/REST PAIN
	44023	ATHERO NATIV ART EXTREM W ULCER
	44024	ATHERO NATIVE ART EXTR W GANGR
	44029	OTH ATHEROSCLER NATIVE ART EXT
	44030	ATHEROSCLER UNS BYP GRAFT/EXT
	44031	ATHERO AUTOLOGOUS VEIN BYP/EXT
	44032	ATHERO NONAUTOL BIO BYPASS/EXT
	4408	ATHEROSCLEROS OTH SPEC ARTERIES
	4409	ATHEROSCLEROSIS GEN/UNSPECIFIED
	44100	DISSECTING AORTIC ANEURYSM UNS
	44101	DISSECT THORACIC AORT ANEURYSM
	44102	DISSECT ABDOM AORTIC ANEURYSM
	44103	DISSECT THORACOABDOM AORTIC AN
	4411	THORACIC AORTIC ANEURYSM RUPT
	4412	THORACIC AORT ANEURYSM NO RUPT
	4413	ABDOMINAL AORTIC ANEURYSM RUPT
	4414	ABDOMINAL AORT ANEURYSM NO RUPT
	4415	AORTIC ANEURYSM UNSPEC RUPTURED
	4416	THORACOABDOM AORT ANEURYSM RUPT
	4417	THORACOABD AORT ANEURYSM NO RUP
	4419	AORTIC ANEURYSM UNSPEC NO RUPT
	4420	ANEURYSM ARTERY UPPER EXTREMITY
	4422	ANEURYSM OF ILIAC ARTERY
	4423	ANEURYSM ARTERY LOWER EXTREMITY
	44281	ANEURYSM ARTERY OF NECK
	44282	ANEURYSM SUBCLAVIAN ARTERY
	44283	ANEURYSM SPLENIC ARTERY
	44284	ANEURYSM OTHER VISCERAL ARTERY
	44289	ANEURYSM OTHER SPECIFIED ARTERY
	4429	ANEURYSM OF UNSPECIFIED SITE
	4430	RAYNAUD'S SYNDROME
	4431	THROMBOANGIITIS OBLITERANS
	44381	PERIPHERAL ANGIOPATHY IN DIS EC
	44389	OTH SPEC PERIPH VASCULAR DIS
	4439	UNSPEC PERIPHERAL VASCULAR DIS
	4440	EMBOLISM/THROMBOSIS ABDOM AORTA
	4441	EMBOLISM/THROMB THORACIC AORTA
	44421	EMBOL/THROMB ART UPPER EXTREM
	44422	EMBOL/THROMB ART LOWER EXTREM
	44481	EMBOLISM/THROMB ILIAC ARTERY
	44489	EMBOLISM/THROMB OTH SPEC ARTERY
	4449	EMBOLISM/THROMB UNSPEC ARTERY
	4465	GIANT CELL ARTERITIS
	4470	ARTERIOVENOUS FISTULA ACQUIRED
	4471	STRICTURE OF ARTERY
	4472	RUPTURE OF ARTERY

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
219-220 DIAG INV & MANAGEMENT VASCULAR		
	4475	NECROSIS OF ARTERY
	4476	ARTERITIS UNSPECIFIED
	4478	OTH DISORD ARTERIES/ARTERIOLES
	4479	UNSPEC DISORD ARTERY/ARTERIOLE
	4480	HERED HEMORRHAG TELANGIECTASIA
	4489	OTH/UNSPEC CAPILLARY DISEASES
	4510	PHLEB/THROMB SUPRFIC LOW EXTREM
	45111	PHLEB/THROMB FEM VEIN(DEEP)SUPF
	45119	PHLEB/THROMB OTH DEEP LOW EXTRM
	4512	PHLEB/THROMB LOWER EXTREM NOS
	45181	PHLEBITIS/THROMB ILIAC VEIN
	45182	PHLEB/THROMB SUPRFIC VEIN UP EX
	45183	PHLEB/THROMB DEEP VEINS UPP EXT
	45184	UNS PHLEBITIS/THROMB UPP EXTREM
	45189	PHLEBITIS/THROMB OTHER SITES
	4519	PHLEBITIS/THROMB UNSPEC SITE
	4531	THROMBOPHLEBITIS MIGRANS
	4532	EMBOLISM/THROMBOSIS VENA CAVA
	4538	EMBOLISM/THROMB OTH SPEC VEINS
	4539	EMBOLISM/THROMBOSIS UNSPEC SITE
	4540	VARICOSE VEINS LOW EXTREM W ULC
	4541	VARIC VEINS LOW EXTREM W INFLAM
	4542	VARIC VEINS LOW EXTREM ULC/INFL
	4549	VARIC VEINS LOW EXTREM UNSPEC
	4563	SUBLINGUAL VARICES
	4568	VARICOSE VEINS OTHER SITES
	4590	HEMORRHAGE UNSPECIFIED
	4591	POSTPHLEBITIC SYNDROME
	4592	COMPRESSION OF VEIN
	45981	VENOUS (PERIPH) INSUFF UNSPEC
	45989	OTH SPEC DISORD CIRCULATORY SYS
	4599	UNSPEC DISORD CIRCULATORY SYS
	7470	PATENT DUCTUS ARTERIOSUS
	74710	COARCTATN AORTA(PRE/POSTDUCTAL)
	74711	INTERRUPTION OF AORTIC ARCH
	74720	ANOMALY OF AORTA UNSPECIFIED
	74721	ANOMALIES OF AORTIC ARCH
	74722	ATRESIA AND STENOSIS OF AORTA
	74729	OTHER ANOMALIES OF AORTA
	7473	ANOMALIES OF PULMONARY ARTERY
	74740	ANOMALIES OF GREAT VEINS UNSPEC
	74741	TOT ANOM PULM VENOUS CONNECTION
	74742	PART ANOM PULM VENOUS CONNECTN
	74749	OTHER ANOMALIES OF GREAT VEINS
	7475	ABSENCE/HYPOPLASIA UMBIL ARTERY
	74760	ANOM PERIPH VASC SYS UNS SITE
	74761	GASTROINTESTINAL VESSEL ANOMALY
	74762	RENAL VESSEL ANOMALY
	74763	UPPER LIMB VESSEL ANOMALY
	74764	LOWER LIMB VESSEL ANOMALY
	74769	OTH PERIPH VASCULAR SYSTEM ANOM
	74782	SPINAL VESSEL ANOMALY
	74789	OTHER SPEC ANOM CIRCULATORY SYS
	7479	UNSPEC ANOM CIRCULATORY SYSTEM
	99674	OTH COMPL OTH VASC DEV/IMPL/GRF
	9972	PERIPH VASCULAR COMPLICATIONS
	9992	OTHER VASCULAR COMPLICATIONS
	V5881	FITTING & ADJUST OF VASC CATHETER

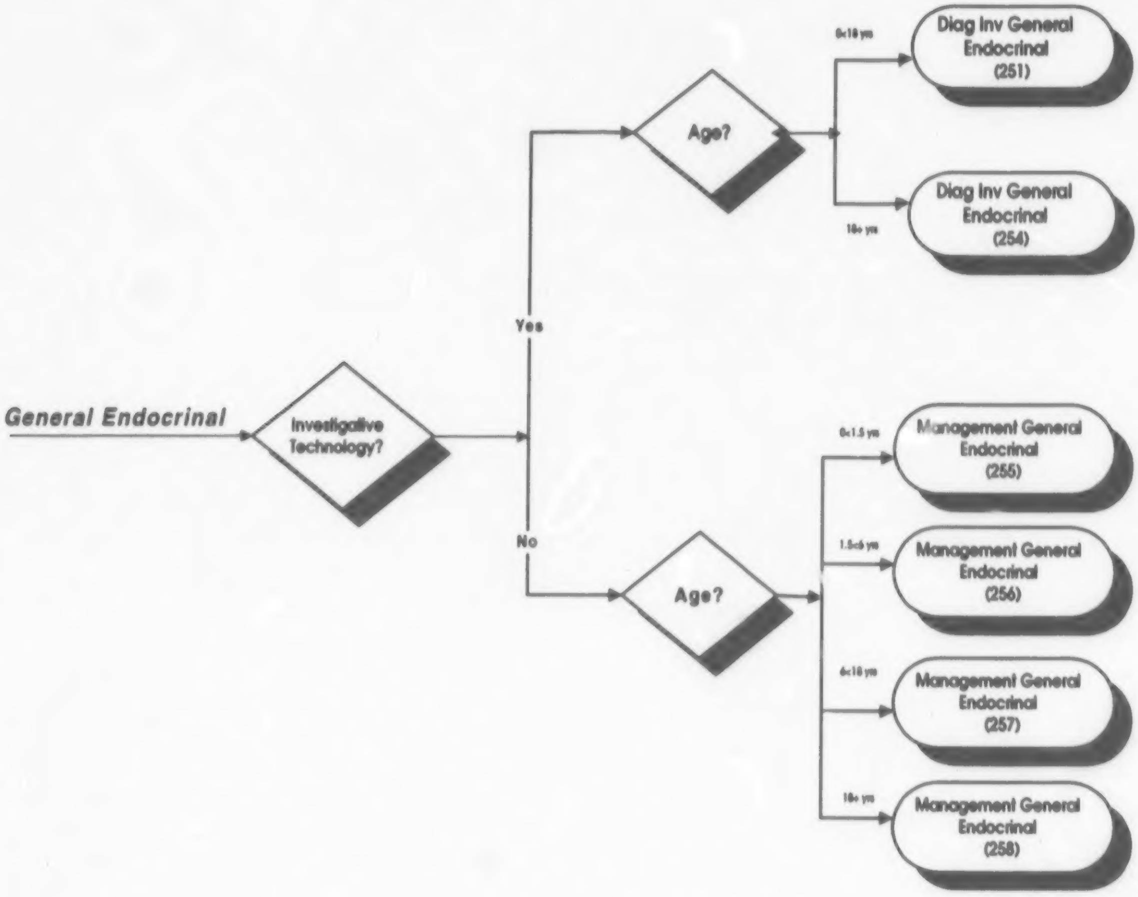
Endocrine
Clinical Grouping


General Endocrinal* (251-258)
No
Thyrotoxicosis (262)
No
Fluid and Electrolyte* (266-267)
No
No
Management Diabetes (259)
<18 yrs
Age?
Management Diabetes (260)
18+ yrs
No
Diagnosis
Endocrine
Diabetes Diagnosis?
Yes
Ketoacidosis Diagnosis
Yes
Management Ketoacidosis (264)

*Clinical Group broken down further
- see following pages.

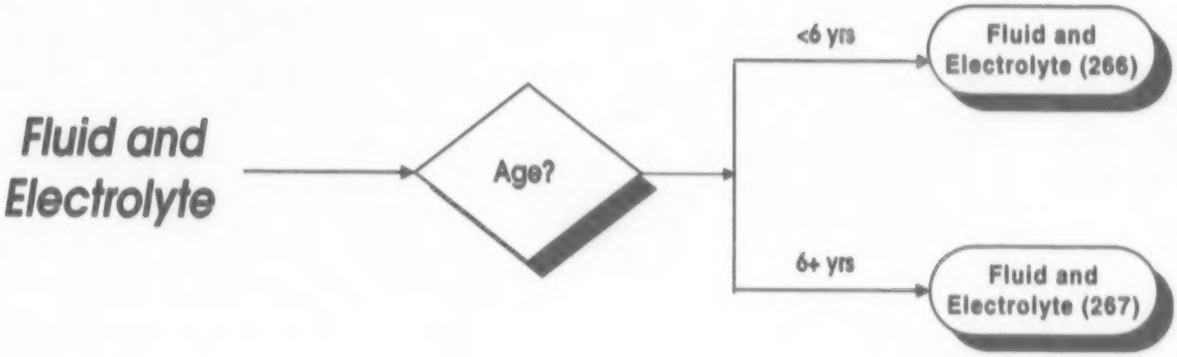
ACCS Grouper
04/00

Endocrine
Clinical Grouping


General Endocrinal
Investigative Technology?
Yes
No
Age?
0<18 yrs
Diag Inv General Endocrinal (251)
18+ yrs
Diag Inv General Endocrinal (254)
Age?
0<1.5 yrs
Management General Endocrinal (255)
1.5<6 yrs
Management General Endocrinal (256)
6<18 yrs
Management General Endocrinal (257)
18+ yrs
Management General Endocrinal (258)

ACCS Grouper
04/00

Endocrine Clinical Grouping


Fluid and Electrolyte
Age?
<6 yrs
Fluid and Electrolyte (266)
6+ yrs
Fluid and Electrolyte (267)

ACCS Grouper
04/00

ACCS CELL
251-258 General Endocrinal

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
251-258 DIAG INV & MANAGEMENT GENERAL ENDOCRINAL		
	01750	TB THYROID GLAND - UNSPEC EXAM
	01751	TB THYROID GLAND - NO EXAM
	01752	TB THYROID GLAND - EXAM UNKNOWN
	01753	TB THYROID GLAND - MICRO DX
	01754	TB THYROID GLAND - CULTURE DX
	01755	TB THYROID GLAND - HISTOLOGY DX
	01756	TB THYROID GLAND - OTHER TEST
	01760	TB ADRENAL GLANDS - UNSPEC EXAM
	01761	TB ADRENAL GLANDS - NO EXAM
	01762	TB ADRENAL GLANDS -EXAM UNKNOWN
	01763	TB ADRENAL GLANDS - MICRO DX
	01764	TB ADRENAL GLANDS - CULTURE DX
	01765	TB ADRENAL GLANDS -HISTOLOGY DX
	01766	TB ADRENAL GLANDS - OTHER TEST
	1222	ECHINOCOCCUS GRANULOSUS THYROID
	2117	BEN NEO ISLETS OF LANGERHANS
	226	BENIGN NEOPLASM THYROID GLANDS
	2270	BENIGN NEOPLASM ADRENAL GLAND
	2271	BEN NEOPLASM PARATHYROID GLAND
	2273	BEN NEO PIT GL/CRANIOPHAR DUCT
	2278	BEN NEO OTHER ENDOCRINE GLANDS
	2279	BEN NEO ENDOCRINE GL SITE NOS
	2400	GOITRE SPECIFIED AS SIMPLE
	2409	GOITRE UNSPECIFIED
	2410	NONTOXIC UNINODULAR GOITRE
	2411	NONTOXIC MULTINODULAR GOITRE
	2419	UNSPEC NONTOXIC NODULAR GOITRE
	243	CONGENITAL HYPOTHYROIDISM
	2440	POSTSURGICAL HYPOTHYROIDISM
	2441	OTH POSTABLATIVE HYPOTHYROIDISM
	2442	IODINE HYPOTHYROIDISM
	2443	OTHER IATROGENIC HYPOTHYROIDISM
	2448	OTHER ACQUIRED HYPOTHYROIDISM
	2449	UNSPECIFIED HYPOTHYROIDISM
	2450	ACUTE THYROIDITIS
	2451	SUBACUTE THYROIDITIS
	2452	CHRONIC LYMPHOCYTIC THYROIDITIS
	2453	CHRONIC FIBROUS THYROIDITIS
	2454	IATROGENIC THYROIDITIS
	2458	OTH/UNSPEC CHRONIC THYROIDITIS
	2459	UNSPECIFIED THYROIDITIS
	2460	DISORD THYROCALCITONIN SECRETN
	2461	DYSHORMONOGENIC GOITRE
	2462	CYST OF THYROID
	2463	HEMORRHAGE/INFARCTION THYROID
	2468	OTHER SPEC DISORDERS OF THYROID
	2469	UNSPECIFIED DISORDER THYROID
	2513	POSTSURGICAL HYPOINSULINEMIA
	2514	ABNORMAL SECRETION OF GLUCAGON
	2518	OTH DISORD PANCREATIC SECRETION
	2519	UNSPEC DISORD PANCREAT SECRETN
	2520	HYPERPARATHYROIDISM

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
251-258 DIAG INV & MANAGEMENT GENERAL ENDOCRINAL		
	2521	HYPOPARATHYROIDISM
	2528	OTH SPEC DISORD PARATHYROID GL
	2529	UNSPEC DISORDER PARATHYROID GL
	2530	ACROMEGALY AND GIGANTISM
	2531	OTH ANT PITUITARY HYPERFUNCTION
	2532	PANHYPOPITUITARISM
	2533	PITUITARY DWARFISM
	2534	OTH ANTERIOR PITUITARY DISORDER
	2535	DIABETES INSIPIDUS
	2536	OTHER DISORDERS NEUROHYPOPHYSIS
	2537	IATROGENIC PITUITARY DISORDERS
	2538	OTH DISORD PIT/DIENCEPH ORIGIN
	2539	UNSPEC DISORD PIT/HYPOTHALAMIC
	2550	CUSHING'S SYNDROME
	2551	HYPERALDOSTERONISM
	2552	ADRENOGENITAL DISORDERS
	2553	OTH CORTICOADRENAL OVERACTIVITY
	2554	CORTICOADRENAL INSUFFICIENCY
	2555	OTHER ADRENAL HYPOFUNCTION
	2556	MEDULLOADRENAL HYPERFUNCTION
	2558	OTH SPEC DISORD ADRENAL GLANDS
	2559	UNSPEC DISORDER ADRENAL GLANDS
	2570	TESTICULAR HYPERFUNCTION
	2571	POSTABLATIVE TEST HYPOFUNCTION
	2572	OTHER TESTICULAR HYPOFUNCTION
	2578	OTHER TESTICULAR DYSFUNCTION
	2579	UNSPEC TESTICULAR DYSFUNCTION
	2580	POLYGLAND ACT W MULT ENDO ADENO
	2581	OTH COMBINATION ENDO DYSFUNTION
	2588	OTHER POLYGLANDULAR DYSFUNCTION
	2589	POLYGLANDULAR DYSFUNCTION NOS
	2590	DELAY SEXUAL DEVEL/PUBERTY NEC
	2591	PRECOC SEXUAL DEVEL/PUBERTY NEC
	2592	CARCINOID SYNDROME
	2593	ECTOPIC HORMONE SECRETION NEC
	2594	DWARFISM NEC
	2598	OTHER SPEC ENDOCRINE DISORDERS
	2599	UNSPECIFIED ENDOCRINE DISORDER
	260	KWASHIORKOR
	261	NUTRITIONAL MARASMUS
	262	OTH SEVERE PROTEIN-CALORIE MALN
	2630	MALNUTRITION OF MODERATE DEGREE
	2631	MALNUTRITION OF MILD DEGREE
	2632	ARREST DEVEL FOLL PROT-CAL MALN
	2638	OTH PROT-CALORIE MALNUTRITION
	2639	UNSPEC PROT-CAL MALNUTRITION
	2648	OTH MAN OF VITAMIN A DEFICIENCY
	2649	UNSPEC VITAMIN A DEFICIENCY
	2650	BERIBERI
	2651	OTH/UNSPEC MAN THIAMINE DEFIC
	2652	PELLAGRA
	2660	ARIBOFLAVINOSIS
	2661	VITAMIN B6 DEFICIENCY
	2662	OTHER B-COMPLEX DEFICIENCIES
	2669	UNSPEC VITAMIN B DEFICIENCY
	267	ASCORBIC ACID DEFICIENCY

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
251-258 DIAG INV & MANAGEMENT GENERAL ENDOCRINAL		
	2689	UNSPEC VITAMIN D DEFICIENCY
	2690	DEFICIENCY OF VITAMIN K
	2691	DEFICIENCY OF OTHER VITAMINS
	2692	UNSPECIFIED VITAMIN DEFICIENCY
	2693	MINERAL DEFICIENCY NEC
	2698	OTHER NUTRITIONAL DEFICIENCY
	2699	UNSPEC NUTRITIONAL DEFICIENCY
	2700	DISTURB AMINO-ACID TRANSPORT
	2701	PHENYLKETONURIA
	2702	OTH DISTURB AROM AMINO-ACID MET
	2703	DISTURB BRANCH-CHN AMINO-AC MET
	2704	DISTURB SULPH-BEAR AMINO-AC MET
	2705	DISTURB HISTIDINE METABOLISM
	2706	DISORDERS UREA CYCLE METABOLISM
	2707	OTH DISTURB ST-CHN AMINO-AC MET
	2708	OTH DISORD AMINO-ACID TRANS/MET
	2709	DISORD AMINO-ACID TRANS/MET NOS
	2710	GLYCOGENOSIS
	2711	GALACTOSEMIA
	2714	RENAL GLYCOSURIA
	2718	OTH DISORD CARBOHYD TRANS/MET
	2719	DISORDER CARBOHYD TRANS/MET NOS
	2720	PURE HYPERCHOLESTEROLEMIA
	2721	PURE HYPERGLYCERIDEMIA
	2722	MIXED HYPERLIPIDEMIA
	2723	HYPERCHYLOMICRONEMIA
	2724	OTHER/UNSPEC HYPERLIPIDEMIA
	2725	LIPOPROTEIN DEFICIENCIES
	2726	LIPODYSTROPHY
	2727	LIPIDOSES
	2728	OTH DISORDERS LIPOID METABOLISM
	2729	UNSPEC DISORD LIPOID METABOLISM
	2771	DISORDERS PORPHYRIN METABOLISM
	2772	OTH DISORD PURINE/PYRIMIDIN MET
	2775	MUCOPOLYSACCHARIDOSIS
	2776	OTH DEFIC CIRCULATING ENZYMES
	2778	OTH SPEC DISORDER OF METABOLISM
	2779	UNSPEC DISORDER OF METABOLISM
	2781	LOCALIZED ADIPOSITY
	2782	HYPERVITAMINOSIS A
	2783	HYPERCAROTINEMIA
	2784	HYPERVITAMINOSIS D
	2788	OTHER HYPERALIMENTATION
	3066	ENDOCRINE MALFUNCT MENTAL FACT
	7591	ANOMALIES OF ADRENAL GLAND
	7592	ANOMALIES OTH ENDOCRINE GLANDS
	7817	TETANY
	7830	ANOREXIA
	7831	ABNORMAL WEIGHT GAIN
	7834	LACK EXPECTED NORMAL PHYS DEVEL
	7835	POLYDIPSIA
	7836	POLYPHAGIA
	7839	OTHER SYMPT NUTRITION/MET/DEVEL
	7945	NONSPEC ABNORM THYROID FUNCTION
	7946	NONSPEC ABNORM FUNCT OTH ENDO
	7947	NONSPEC ABNORM BASAL MET FUNCT

ACCS CELL
259-260 Management Diabetes

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
259-260 MANAGEMENT DIABETES		
	25000	DIABETES MELL NO COMPL TYPE II
	25001	DIABETES MELL NO COMPL TYPE I
	25002	DM NO COMPL TYPE II UNCONTROL
	25003	DM NO COMPL TYPE I UNCONTROLLED
	25020	DIABETES W HYPEROS TYPE II
	25021	DIABETES W HYPEROS TYPE I
	25022	DM W HYPEROS TYPE II UNCONTROL
	25023	DM W HYPEROS TYPE I UNCONTROL
	25030	DIABETES WITH OTH COMA TYPE II
	25031	DIABETES WITH OTH COMA TYPE I
	25032	DM W OTH COMA TYPE II UNCONTROL
	25033	DM W OTH COMA TYPE I UNCONTROL
	25042	DM W RENAL MAN TYP II UNCONTROL
	25043	DM W RENAL MAN TYPE I UNCONTROL
	25052	DM W OPHTH MAN TYP II UNCONTROL
	25053	DM W OPHTH MAN TYPE I UNCONTROL
	25062	DM W NEURO MAN TYP II UNCONTROL
	25063	DM W NEURO MAN TYPE I UNCONTROL
	25072	DM W CIRC DISORD TYP II UNCONTR
	25073	DM W CIRC DISORD TYPE I UNCONTR
	25080	DIABETES W OTH SPEC MAN TYPE II
	25081	DIABETES W OTH SPEC MAN TYPE I
	25082	DM W OTH SPEC MAN TYP II UNCONT
	25083	DM W OTH SPEC MAN TYPE I UNCONT
	25090	DIABETES W UNSPEC COMPL TYPE II
	25091	DIABETES W UNSPEC COMPL TYPE I
	25092	DM W UNSP COMPL TYPE II UNCONTR
	25093	DM W UNSP COMPL TYPE I UNCONTR
	2511	OTHER SPECIFIED HYPOGLYCEMIA
	2512	HYPOGLYCEMIA UNSPECIFIED

ACCS CELL
262 Thyrotoxicosis

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
262 THYROTOXICOSIS		
	24200	TOX DIFF GOITRE NO CRISIS/STORM
	24201	TOX DIFF GOITRE W CRISIS/STORM
	24210	TOX UNINOD GOITRE NO CRIS/STORM
	24211	TOX UNINOD GOITRE W CRIS/STORM
	24220	TOX MULTNOD GOITRE NO CRISIS
	24221	TOX MULTNOD GOITRE W CRIS/STORM
	24230	TOX NOD GOITRE UNSPEC NO CRISIS
	24231	TOX NOD GOITRE UNSPEC W CRISIS
	24240	THYROTOX ECT NOD NO CRIS/STORM
	24241	THYROTOX ECT NOD W CRISIS/STORM
	24280	THYROTOX OTH ORIG NO CRIS/STORM
	24281	THYROTOX OTH ORIG W CRIS/STORM
	24290	THYROTOX NOS NO CRISIS/STORM
	24291	THYROTOX NOS WITH CRISIS/STORM

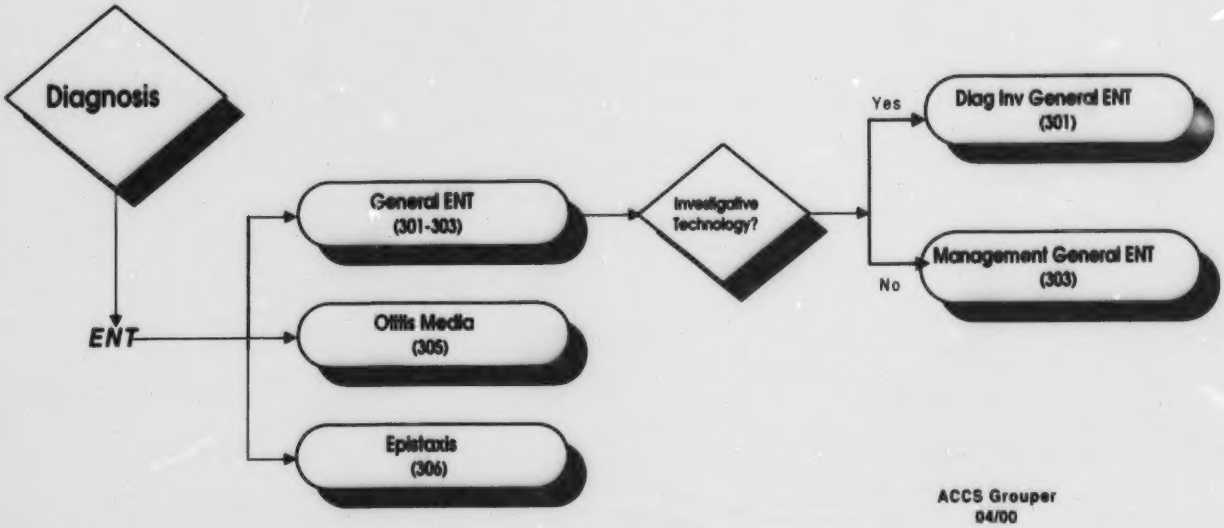
ACCS CELL
264 Management Ketoacidosis

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
264 MANAGEMENT KETOACIDOSIS		
	25010	DIABETES W KETOACIDOSIS TYPE II
	25011	DIABETES W KETOACIDOSIS TYPE I
	25012	DM W KETOACIDOSIS TYPE II UNCON
	25013	DM W KETOACIDOSIS TYPE I UNCONT

ACCS CELL
266-267 Fluid & Electrolyte

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
266-267 FLUID & ELECTROLYTE		
	2750	DISORDERS OF IRON METABOLISM
	2751	DISORDERS OF COPPER METABOLISM
	2752	DISORDERS MAGNESIUM METABOLISM
	2753	DISORDERS PHOSPHORUS METABOLISM
	27540	UNSPECIFIED DISORDER OF CALCIUM
	27541	HYPOCALCEMIA
	27542	HYERCALCEMIA
	27549	OTHER DISORDERS OF CALCIUM METABOLISM
	2758	OTH SPEC DISORDER MINERAL MET
	2759	DISORDER MINERAL METABOLISM NOS
	2761	HYPOSMOLALITY/HYPONATREMIA
	2762	ACIDOSIS
	2763	ALKALOSIS
	2764	MIXED ACID-BASE BALANCE DISORD
	2765	VOLUME DEPLETION
	2766	FLUID OVERLOAD
	2767	HYPERPOTASSEMIA
	2768	HYPOPOTASSEMIA
	2769	ELECTROLYTE/FLUID DISORDERS NEC

ENT (Ears, Nose, Throat) Clinical Grouping


Diagnosis
ENT
General ENT (301-303)
Otitis Media (305)
Epistaxis (306)
Investigative Technology?
Yes
No
Diag Inv General ENT (301)
Management General ENT (303)

ACCS Grouper
04/00

ACCS CELL
301-304 General ENT

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
301-303 DIAG INV & MANAGEMENT GENERAL ENT		
	01220	IS TRACH/BRONCH TB-UNSPEC EXAM
	01221	IS TRACH/BRONCH TB - NO EXAM
	01222	IS TRACH/BRONCH TB-EXAM UNKNOWN
	01223	IS TRACH/BRONCH TB - MICRO DX
	01224	IS TRACH/BRONCH TB - CULTURE DX
	01225	IS TRACH/BRONCH TB-HISTOLOGY DX
	01226	IS TRACH/BRONCH TB - OTHER TEST
	01230	TB LARYNGITIS - UNSPEC EXAM
	01231	TB LARYNGITIS - NO EXAM
	01232	TB LARYNGITIS - EXAM UNKNOWN
	01233	TB LARYNGITIS - MICRO DX
	01234	TB LARYNGITIS - CULTURE DX
	01235	TB LARYNGITIS - HISTOLOGY DX
	01236	TB LARYNGITIS - OTHER TEST
	01560	TB OF MASTOID - UNSPEC EXAM
	01561	TB OF MASTOID - NO EXAM
	01562	TB OF MASTOID - EXAM UNKNOWN
	01563	TB OF MASTOID - MICRO DX
	01564	TB OF MASTOID - CULTURE DX
	01565	TB OF MASTOID - HISTOLOGY DX
	01566	TB OF MASTOID - OTHER TEST
	01740	TUBERCULOSIS EAR - UNSPEC EXAM
	01741	TUBERCULOSIS EAR - NO EXAM
	01742	TUBERCULOSIS EAR - EXAM UNKNOWN
	01743	TUBERCULOSIS EAR - MICRO DX
	01744	TUBERCULOSIS EAR - CULTURE DX
	01745	TUBERCULOSIS EAR - HISTOLOGY DX
	01746	TUBERCULOSIS EAR - OTHER TEST
	0320	FAUCIAL DIPHTHERIA
	0321	NASOPHARYNGEAL DIPHTHERIA
	0322	ANTERIOR NASAL DIPHTHERIA
	0323	LARYNGEAL DIPHTHERIA
	0340	STREPTOCOCCAL SORE THROAT
	05371	OTITIS EXTERNA D/T HERP ZOSTER
	0542	HERPETIC GINGIVOSTOMATITIS
	05473	HERPES SIMPLEX OTITIS EXTERNA
	0740	HERPANGINA
	09486	SYPHILITIC ACOUSTIC NEURITIS
	0986	GONOCOCCAL INFECTION OF PHARYNX
	101	VINCENT'S ANGINA
	1025	YAWS GANGOSA
	1120	CANDIDIASIS OF MOUTH
	11282	CANDIDAL OTITIS EXTERNA
	2100	BENIGN NEOPLASM OF LIP
	2101	BENIGN NEOPLASM OF TONGUE
	2102	BENIGN NEOPLASM MAJ SALIVARY GL
	2103	BENIGN NEOPLASM FLOOR OF MOUTH
	2104	BEN NEO OTH/UNSPEC PARTS MOUTH
	2105	BENIGN NEOPLASM OF TONSIL
	2106	BEN NEO OTH PARTS OF OROPHARYNX
	2107	BENIGN NEOPLASM OF NASOPHARYNX
	2108	BENIGN NEOPLASM OF HYPOPHARYNX

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
301-303 DIAG INV & MANAGEMENT GENERAL ENT		
	2109	BEN NEOPLASM OF PHARYNX UNSPEC
	2120	BEN NEO NASAL CAV/MID EAR/SINUS
	2121	BENIGN NEOPLASM OF LARYNX
	2131	BENIGN NEOPLASM LOWER JAW BONE
	38000	PERICHONDRITIS OF PINNA UNSPEC
	38021	CHOLESTEATOMA OF EXTENAL EAR
	38030	DISORDER OF PINNA UNSPECIFIED
	38031	HEMATOMA OF AURICLE OR PINNA
	38032	ACQUIRED DEFORM AURICLE/PINNA
	38039	OTH NONINFECTIOUS DISORD PINNA
	3804	IMPACTED CERUMEN
	38050	ACQUIR STENOS EXT EAR CANAL NOS
	38051	STENOS EXT EAR CANAL FR TRAUMA
	38052	STENOSIS EXT EAR CANAL FR SURG
	38053	STENOS EXT EAR CANAL FR INFLAM
	38081	EXOSTOSIS OF EXTERNAL EAR CANAL
	38089	OTHER DISORDERS OF EXTERNAL EAR
	3809	UNSPEC DISORDER OF EXTERNAL EAR
	38150	EUSTACHIAN SALPINGITIS UNSPEC
	38151	ACUTE EUSTACHIAN SALPINGITIS
	38152	CHRONIC EUSTACHIAN SALPINGITIS
	38160	OBSTRUCTION EUSTACHIAN TUBE NOS
	38161	OSSEOUS OBSTRUC EUSTACHIAN TUBE
	38162	INTRINSIC CART OBSTRUCT EUSTACH
	38163	EXTRINSIC CART OBSTRUCT EUSTACH
	3817	PATULOUS EUSTACHIAN TUBE
	38181	DYSFUNCTION OF EUSTACHIAN TUBE
	38189	OTHER DISORDERS EUSTACHIAN TUBE
	3819	UNSPEC EUSTACHIAN TUBE DISORDER
	38300	ACUTE MASTOIDITIS WITHOUT COMPL
	38301	SUBPERIOSTEAL ABSCESS MASTOID
	38302	ACUTE MASTOIDITIS W OTHER COMPL
	3831	CHRONIC MASTOIDITIS
	38320	PETROSITIS UNSPECIFIED
	38321	ACUTE PETROSITIS
	38322	CHRONIC PETROSITIS
	38330	POSTMASTOIDECTOMY COMPL NOS
	38331	MUCOSAL CYST POSTMASTOIDECT CAV
	38332	RECUR CHOLESTEAT POSTMASTOIDECT
	38333	GRANULATIONS POSTMASTOIDECT CAV
	38381	POSTAURICULAR FISTULA
	38389	OTHER DISORDERS OF MASTOID
	3839	UNSPECIFIED MASTOIDITIS
	38400	ACUTE MYRINGITIS UNSPECIFIED
	38401	BULLOUS MYRINGITIS
	38409	OTH AC MYRINGITIS NO OTIT MEDIA
	3841	CHR MYRINGITIS NO OTITIS MEDIA
	38420	PERF TYMPANIC MEMBRANE UNSPEC
	38421	CENTRAL PERF TYMPANIC MEMBRANE
	38422	ATTIC PERF TYMPANIC MEMBRANE
	38423	OTH MARG PERF TYMPANIC MEMBRANE
	38424	MULTIPLE PERF TYMPANIC MEMBRANE
	38425	TOTAL PERF TYMPANIC MEMBRANE
	38481	ATROPH FLACCID TYMPAN MEMBRANE
	38482	ATROPH NONFLACC TYMPAN MEMBRANE
	3849	DISORDER TYMPANIC MEMBRANE NOS

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
301-303 DIAG INV & MANAGEMENT GENERAL ENT		
	38500	TYMPANOSCLEROSIS UNSPEC INVOLV
	38501	TYMPANOSCLEROS TYMPAN MEMBRANE
	38502	TYMPANOSCLEROS MEMBRANE/OSSICLE
	38503	TYMPANOSCLEROS MEMB/OSS/MID EAR
	38509	TYMPANOSCLEROS OTH COMBINATION
	38510	ADHESIVE MID EAR DIS INVOLV NOS
	38511	ADHESIONS OF DRUM HEAD TO INCUS
	38512	ADHESIONS DRUM HEAD TO STAPES
	38513	ADHESION DRUM HEAD PROMONTORIUM
	38519	OTHER ADHESIONS/COMBINATIONS
	38521	IMPAIRED MOBILITY OF MALLEUS
	38522	IMPAIR MOBILITY OTH EAR OSSICLE
	38523	DISCONTINUITY/DISLOCATN EAR OSS
	38524	PART LOSS/NECROSIS EAR OSSICLES
	38530	CHOLESTEATOMA UNSPECIFIED
	38531	CHOLESTEATOMA OF ATTIC
	38532	CHOLESTEATOMA OF MIDDLE EAR
	38533	CHOLESTEATOMA MID EAR/MASTOID
	38535	DIFFUSE CHOLESTEATOSIS
	38582	CHOLESTERIN GRANULOMA
	38583	RETAINED FOREIGN BODY MID EAR
	38589	OTH DISORDER MIDDLE EAR/MASTOID
	3859	DISORDER MIDDLE EAR/MASTOID NOS
	3870	OTOSCLEROSIS OVAL WINDOW NONOBL
	3871	OTOSCLEROSIS OVAL WINDOW OBLIT
	3872	COCHLEAR OTOSCLEROSIS
	3878	OTHER OTOSCLEROSIS
	3879	UNSPECIFIED OTOSCLEROSIS
	38800	DEGEN/VASC DISORDER EAR UNSPEC
	38801	PRESBYACUSIS
	38802	TRANSIENT ISCHEMIC DEAFNESS
	38810	NOISE EFFECTS ON INNER EAR NOS
	38811	ACOUSTIC TRAUMA TO EAR
	38812	NOISE-INDUCED HEARING LOSS
	3882	SUDDEN HEARING LOSS UNSPEC
	38830	TINNITUS UNSPECIFIED
	38831	SUBJECTIVE TINNITUS
	38832	OBJECTIVE TINNITUS
	38840	ABNORM AUDITORY PERCEPTION NOS
	38841	DIPLACUSIS
	38842	HYPERACUSIS
	38843	IMPAIR AUDITORY DISCRIMINATION
	38844	RECRUITMENT
	3885	DISORDERS OF ACOUSTIC NERVE
	38860	OTORRHEA UNSPECIFIED
	38869	OTHER OTORRHEA
	38870	OTALGIA UNSPECIFIED
	38871	OTOGENIC PAIN
	38872	REFERRED PAIN
	3888	OTHER DISORDERS OF EAR
	3889	UNSPECIFIED DISORDER OF EAR
	38900	CONDUCTIVE HEARING LOSS UNSPEC
	38901	CONDUCTIVE HEARING LOSS EXT EAR
	38902	CONDUCT HEAR LOSS TYMPANIC MEMB
	38903	CONDUCTIVE HEARING LOSS MID EAR
	38904	CONDUCT HEARING LOSS INNER EAR

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
301-303 DIAG INV & MANAGEMENT GENERAL ENT		
	38908	CONDUCTIVE HEARING LOSS COMBIN
	38910	SENSORINEURAL HEARING LOSS NOS
	38911	SENSORY HEARING LOSS
	38912	NEURAL HEARING LOSS
	38914	CENTRAL HEARING LOSS
	38918	SENSORINEURAL HEAR LOSS COMBIN
	3892	MIXED CONDUCT SENSORINEUR DEAF
	3897	DEAF MUTISM NEC
	3898	OTHER SPEC FORMS HEARING LOSS
	3899	UNSPECIFIED HEARING LOSS
	460	ACUTE NASOPHARYNGITIS
	4610	ACUTE MAXILLARY SINUSITIS
	4611	ACUTE FRONTAL SINUSITIS
	4612	ACUTE ETHMOIDAL SINUSITIS
	4613	ACUTE SPHENOIDAL SINUSITIS
	4618	OTHER ACUTE SINUSITIS
	4619	UNSPECIFIED ACUTE SINUSITIS
	462	ACUTE PHARYNGITIS
	463	ACUTE TONSILLITIS
	4640	ACUTE LARYNGITIS
	46410	ACUTE TRACHEITIS NO OBSTRUCTION
	46411	ACUTE TRACHEITIS W OBSTRUCTION
	46420	AC LARYNGOTRACHEIT NO OBSTRUCT
	46421	AC LARYNGOTRACHEITIS W OBSTRUCT
	4650	ACUTE LARYNGOPHARYNGITIS
	4658	ACUTE URI OTHER MULTIPLE SITES
	4659	ACUTE URI UNSPECIFIED SITE
	470	DEVIATED NASAL SEPTUM
	4710	POLYP OF NASAL CAVITY
	4711	POLYPOID SINUS DEGENERATION
	4718	OTHER POLYP OF SINUS
	4719	UNSPECIFIED NASAL POLYP
	4720	CHRONIC RHINITIS
	4721	CHRONIC PHARYNGITIS
	4722	CHRONIC NASOPHARYNGITIS
	4730	CHRONIC MAXILLARY SINUSITIS
	4731	CHRONIC FRONTAL SINUSITIS
	4732	CHRONIC ETHMOIDAL SINUSITIS
	4733	CHRONIC SPHENOIDAL SINUSITIS
	4738	OTHER CHRONIC SINUSITIS
	4739	UNSPECIFIED (CHRONIC) SINUSITIS
	47400	CHRONIC TONSILLITIS
	47401	CHRONIC ADENOIDITIS
	47402	CHRONIC TONSILLITIS AND ADENOIDITIS
	47410	HYPERTROPHY TONSILS W ADENOIDS
	47411	HYPERTROPHY TONSILS ALONE
	47412	HYPERTROPHY ADENOIDS ALONE
	4742	ADENOID VEGETATIONS
	4748	OTHER CHR DIS TONSILS/ADENOIDS
	4749	UNSPEC CHR DIS TONSILS/ADENOIDS
	475	PERITONSILLAR ABSCESS
	4760	CHRONIC LARYNGITIS
	4761	CHRONIC LARYNGOTRACHEITIS
	4770	ALLERGIC RHINITIS DUE TO POLLEN
	4778	ALLERG RHINITIS D/T OTH ALLERG
	4779	ALLERGIC RHINITIS CAUSE UNSPEC

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
301-303 DIAG INV & MANAGEMENT GENERAL ENT		
	4780	HYPERTROPHY OF NASAL TURBINATES
	4781	OTHER DIS NASAL CAVITY/SINUSES
	47820	UNSPECIFIED DISEASE OF PHARYNX
	47821	CELLULITIS PHARYNX/NASOPHARYNX
	47822	PARAPHARYNGEAL ABSCESS
	47824	RETROPHARYNGEAL ABSCESS
	47825	EDEMA OF PHARYNX OR NASOPHARYNX
	47826	CYST OF PHARYNX OR NASOPHARYNX
	47829	OTHER DISEASES OF PHARYNX NEC
	47830	PARALYSIS VOCAL CORD/LARYNX NOS
	47831	PARALYS VOCAL CORDS UNILAT PART
	47832	PARALYS VOC CORD UNILAT COMPLET
	47833	PARALYS VOCAL CORDS BILAT PART
	47834	PARALYS VOC CORDS BILAT COMPLET
	4784	POLYP OF VOCAL CORD OR LARYNX
	4785	OTHER DISEASES OF VOCAL CORDS
	4786	EDEMA OF LARYNX
	47870	UNSPECIFIED DISEASE OF LARYNX
	47871	CELLULIT/PERICHONDRITIS LARYNX
	47874	STENOSIS OF LARYNX
	47875	LARYNGEAL SPASM
	47879	OTHER DISEASES OF LARYNX NEC
	4788	UPPER RESP HYPERSENS RXN NOS
	4789	OTH/UNSPEC DIS UPPER RESP TRACT
	4871	INFLUENZA W OTH RESPIRATORY MAN
	4878	INFLUENZA W OTH MANIFESTATIONS
	52400	UNSPECIFIED ANOMALY OF JAW
	52401	MAXILLARY HYPERPLASIA
	52402	MANDIBULAR HYPERPLASIA
	52403	MAXILLARY HYPOPLASIA
	52404	MANDIBULAR HYPOPLASIA
	52405	MACROGENIA
	52406	MICROGENIA
	52409	OTHER SPECIFIED ANOMALY OF JAW
	52410	UNSPEC ANOM JAW TO CRANIAL BASE
	52411	MAXILLARY ASYMMETRY
	52412	OTHER JAW ASYMMETRY
	52419	OTH SPEC ANOM JAW/CRANIAL BASE
	5261	FISSURAL CYSTS OF JAW
	5262	OTHER CYSTS OF JAWS
	5263	CENTRAL GIANT CELL GRANULOMA
	5264	INFLAMMATORY CONDITIONS OF JAW
	5265	ALVEOLITIS OF JAW
	52681	EXOSTOSIS OF JAW
	52689	OTHER DISEASES OF THE JAWS
	5269	UNSPECIFIED DISEASE OF THE JAWS
	5270	ATROPHY OF SALIVARY GLANDS
	5271	HYPERTROPHY OF SALIVARY GLANDS
	5272	SIALOADENITIS
	5273	ABSCESS OF SALIVARY GLANDS
	5274	FISTULA OF SALIVARY GLANDS
	5275	SIALOLITHIASIS
	5276	MUCOCELE OF SALIVARY GLANDS
	5277	DISTURBANCE SALIVARY SECRETION
	5278	OTH SPEC DIS SALIVARY GLANDS
	5279	UNSPEC DISEASE SALIVARY GLANDS

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
301-303 DIAG INV & MANAGEMENT GENERAL ENT		
	5280	STOMATITIS
	5281	CANCRUM ORIS
	5282	ORAL APHTHAE
	5283	CELLULIT/ABSCESS ORAL SOFT TISS
	5284	CYSTS OF ORAL SOFT TISSUES
	5285	DISEASES OF LIPS
	5286	LEUKOPLAKIA ORAL MUCOSA/TONGUE
	5287	OTHER DISTURB ORAL EPITH/TONGUE
	5288	ORAL SUBMUC FIBROSIS INC TONGUE
	5289	OTH/UNSPEC DIS ORAL SOFT TISSUE
	5290	GLOSSITIS
	5291	GEOGRAPHIC TONGUE
	5292	MEDIAN RHOMBOID GLOSSITIS
	5293	HYPERTROPHY OF TONGUE PAPILLAE
	5294	ATROPHY OF TONGUE PAPILLAE
	5295	PLICATED TONGUE
	5296	GLOSSODYNIA
	5298	OTHER SPEC CONDITIONS OF TONGUE
	5299	UNSPECIFIED CONDITION OF TONGUE
	7380	ACQUIRED DEFORMITY OF NOSE
	7387	CAULIFLOWER EAR
	74400	ANOM EAR W IMPAIR HEARING NOS
	74401	ABSENCE OF EXTERNAL EAR
	74402	OTH ANOM EXT EAR W IMPAIR HEAR
	74403	ANOMALY MIDDLE EAR EXC OSSICLES
	74404	ANOMALIES OF EAR OSSICLES
	74405	ANOMALIES OF INNER EAR
	74409	OTHER ANOM EAR W IMPAIR HEARING
	7441	ACCESSORY AURICLE
	74421	ABSENCE OF EAR LOBE CONGENITAL
	74422	MACROTIA
	74423	MICROTIA
	74424	SPEC ANOMALIES EUSTACHIAN TUBE
	74429	OTHER SPECIFIED ANOMALIES EAR
	7443	UNSPECIFIED ANOMALY OF EAR
	74441	BRANCHIAL CLEFT SINUS/FISTULA
	74442	BRANCHIAL CLEFT CYST
	74443	CERVICAL AURICLE
	74446	PREAURICULAR SINUS OR FISTULA
	74447	PREAURICULAR CYST
	74449	OTHER BRANCHIAL CLEFT ANOMALY
	74481	MACROCHEILIA
	74482	MICROCHEILIA
	74483	MACROSTOMIA
	74484	MICROSTOMIA
	74489	OTHER SPEC ANOMALIES FACE/NECK
	7480	CHOANAL ATRESIA
	7481	OTHER ANOMALIES OF NOSE
	7482	WEB OF LARYNX
	7483	OTH ANOM LARYNX/TRACHEA/BRONCH
	74900	CLEFT PALATE UNSPECIFIED
	74901	UNILAT CLEFT PALATE COMPLETE
	74902	UNILAT CLEFT PALATE INCOMPLETE
	74903	BILATERAL CLEFT PALATE COMPLETE
	74904	BILAT CLEFT PALATE INCOMPLETE
	74910	CLEFT LIP UNSPECIFIED

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
301-303 DIAG INV & MANAGEMENT GENERAL ENT		
	74911	UNILATERAL CLEFT LIP COMPLETE
	74912	UNILATERAL CLEFT LIP INCOMPLETE
	74913	BILATERAL CLEFT LIP COMPLETE
	74914	BILATERAL CLEFT LIP INCOMPLETE
	74920	CLEFT PALATE WITH CLEFT LIP NOS
	74921	UNILAT CLEFT PALATE/LIP COMPLET
	74922	UNILAT CLEFT PALATE/LIP INCOMPL
	74923	BILAT CLEFT PALATE/LIP COMPLETE
	74924	BILAT CLEFT PALATE/LIP INCOMPL
	74925	OTH COMBIN CLEFT PALATE AND LIP
	7500	TONGUE TIE
	75010	ANOMALY OF TONGUE UNSPECIFIED
	75011	AGLOSSIA
	75012	CONGENITAL ADHESIONS OF TONGUE
	75013	FISSURE OF TONGUE
	75015	MACROGLOSSIA
	75016	MICROGLOSSIA
	75019	OTHER ANOMALIES OF TONGUE
	75021	ABSENCE OF SALIVARY GLAND
	75022	ACCESSORY SALIVARY GLAND
	75023	ATRESIA SALIVARY DUCT
	75024	CONGEN FISTULA SALIVARY GLAND
	75025	CONGENITAL FISTULA OF LIP
	75026	OTHER SPECIFIED ANOMALIES MOUTH
	75027	DIVERTICULUM OF PHARYNX
	75029	OTHER SPEC ANOMALIES OF PHARYNX
	7841	THROAT PAIN
	78440	VOICE DISTURBANCE UNSPECIFIED
	78441	APHONIA
	78449	OTHER VOICE DISTURBANCE
	7845	OTHER SPEECH DISTURBANCE
	7849	OTHER SYMPTOMS HEAD AND NECK
	7862	COUGH
	79415	ABNORMAL AUDITORY FUNCT STUDIES
	V412	PROBLEMS WITH HEARING
	V413	OTHER EAR PROBLEMS
	V414	PROBLEMS WITH VOICE PRODUCTION
	V415	PROBLEMS WITH SMELL AND TASTE
	V532	FITTING/ADJUSTMENT HEARING AID
	V550	ATTENTION TO TRACHEOSTOMY
	V721	EXAMINATION OF EARS AND HEARING

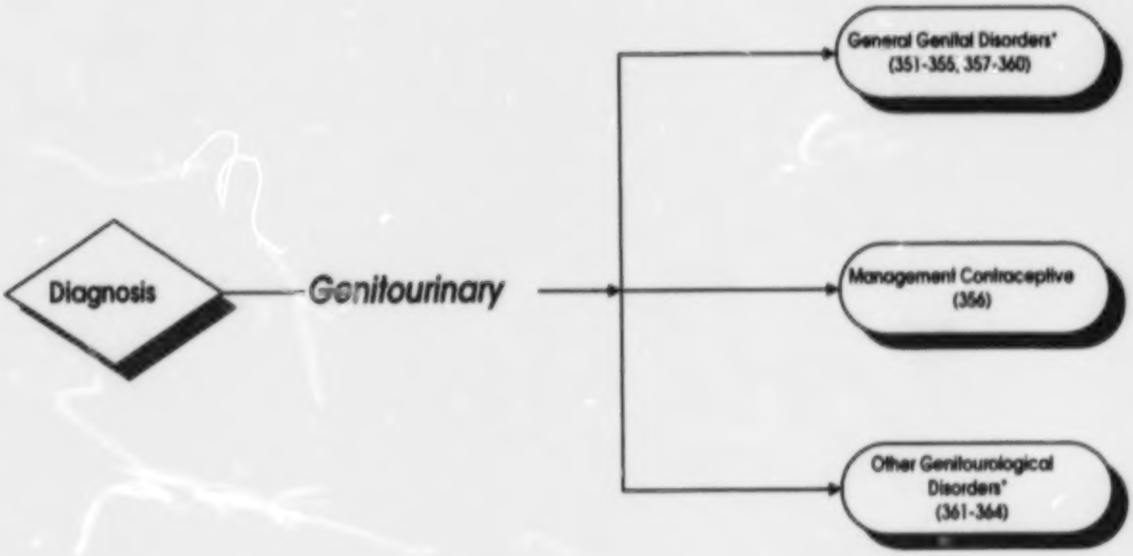
ACCS CELL
305 Otitis Media

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
305 OTITIS MEDIA		
	0552	POST MEASLES OTITIS MEDIA
	38010	INFECTIVE OTITIS EXTERNA UNSPEC
	38011	ACUTE INFECTION OF PINNA
	38012	ACUTE SWIMMERS' EAR
	38013	OTH AC INFECTIONS EXTERNAL EAR
	38014	MALIGNANT OTITIS EXTERNA
	38015	CHRONIC MYCOTIC OTITIS EXTERNA
	38016	OTH CHR INFECTIVE OTIT EXTERNA
	38022	OTHER ACUTE OTITIS EXTERNA
	38023	OTHER CHRONIC OTITIS EXTERNA
	38100	AC NONSUPP OTITIS MEDIA UNSPEC
	38101	ACUTE SEROUS OTITIA MEDIA
	38102	ACUTE MUCOID OTITIS MEDIA
	38103	ACUTE SANGUINOUS OTITIS MEDIA
	38104	AC ALLERGIC SEROUS OTITIS MEDIA
	38105	AC ALLERGIC MUCOID OTITIS MEDIA
	38106	AC ALLERG SANGUINOUS OTIT MEDIA
	38110	CHR SEROUS OTIT MEDIA SIMP/NOS
	38119	OTH CHRONIC SEROUS OTITIS MEDIA
	38120	CHR MUCOID OTIT MEDIA SIMP/NOS
	38129	OTH CHRONIC MUCOID OTITIS MEDIA
	3813	OTH/NOS CHR NONSUPP OTIT MEDIA
	3814	NONSUPP OTITIS MEDIA NOT ACUTE
	38200	AC SUPP OTIT MEDIA NO DRUM RUPT
	38201	AC SUPP OTIT MEDIA W DRUM RUPT
	38202	AC SUPP OTITIS MEDIA DISEASE EC
	3821	CHR TUBOTYMPAN SUPP OTIT MEDIA
	3822	CHR ATTICOANTRAL SUPP OTIT MED
	3823	UNSPEC CHR SUPP OTITIS MEDIA
	3824	UNSPEC SUPPURATIVE OTITIS MEDIA
	3829	UNSPECIFIED OTITIS MEDIA

ACCS CELL
306 Epistaxis

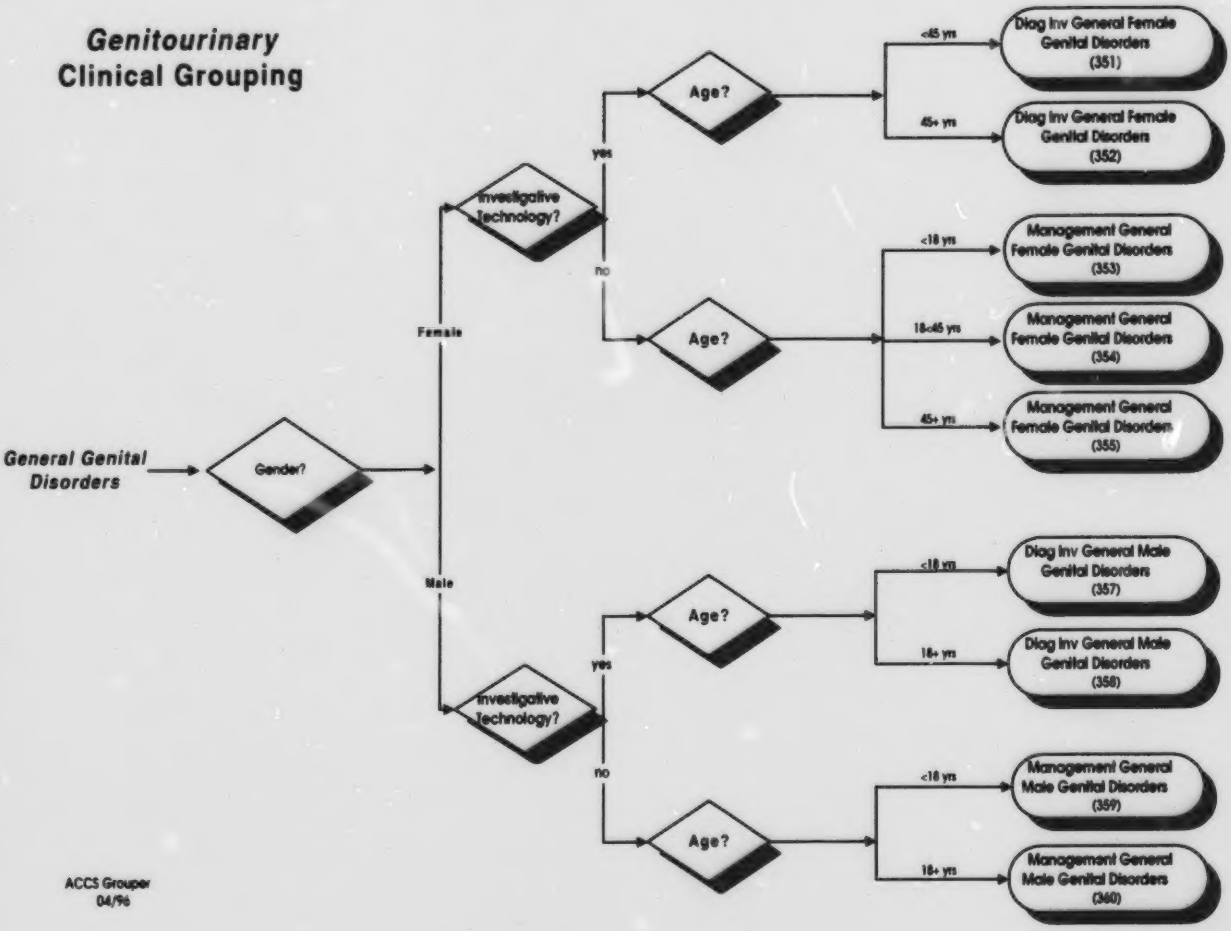
ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
306 EPISTAXIS		
	7847	EPISTAXIS

Genitourinary Clinical Grouping


Diagnosis
Genitourinary
General Genital Disorders*
(351-355, 357-360)
Management Contraceptive
(356)
Other Genitourological
Disorders*
(361-364)

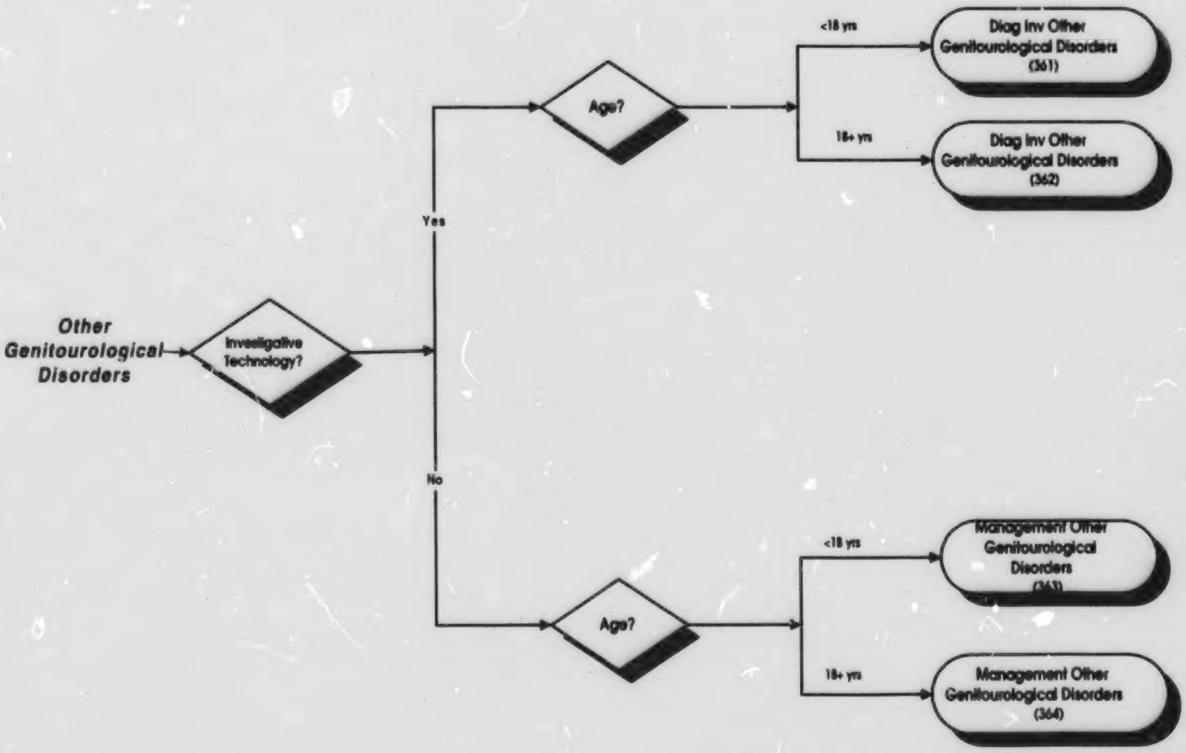
*Clinical Group broken down further - see following pages.

Genitourinary Clinical Grouping


General Genital Disorders
Gender?
Female
Male
Investigative Technology?
yes
no
Age?
<45 yrs
45+ yrs
Diag Inv General Female Genital Disorders (351)
Diag Inv General Female Genital Disorders (352)
<18 yrs
18<45 yrs
45+ yrs
Management General Female Genital Disorders (353)
Management General Female Genital Disorders (354)
Management General Female Genital Disorders (355)
Investigative Technology?
yes
no
Age?
<18 yrs
18+ yrs
Diag Inv General Male Genital Disorders (357)
Diag Inv General Male Genital Disorders (358)
<18 yrs
18+ yrs
Management General Male Genital Disorders (359)
Management General Male Genital Disorders (360)

ACCS Grouper
04/96

Genitourinary Clinical Grouping


Other Genitourological Disorders
Investigative Technology?
Yes
No
Age?
<18 yrs
18+ yrs
Diag Inv Other Genitourological Disorders (361)
Diag Inv Other Genitourological Disorders (362)
Age?
<18 yrs
18+ yrs
Management Other Genitourological Disorders (363)
Management Other Genitourological Disorders (364)

ACCS Grouper
04/96

ACCS CELL
351-355 General Female Genital Disorders

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
351-355 DIAG INV & MANAGEMENT GENERAL FEMALE GENITAL DISORDERS		
	01660	TB OOPH/SALPINGITIS-UNSPEC EXAM
	01661	TB OOPH/SALPINGITIS - NO EXAM
	01662	TB OOPH/SALPINGITIS-EXM UNKNOWN
	01663	TB OOPH/SALPINGITIS - MICRO DX
	01664	TB OOPH/SALPINGITIS -CULTURE DX
	01665	TB OOPH/SALPINGITIS - HISTO DX
	01666	TB OOPH/SALPINGITIS -OTHER TEST
	01670	TB FEMALE GEN ORGAN-UNSPEC EXAM
	01671	TB FEMALE GEN ORGAN - NO EXAM
	01672	TB FEMALE GEN ORGAN-EXM UNKNOWN
	01673	TB FEMALE GEN ORGAN - MICRO DX
	01674	TB FEMALE GEN ORGAN -CULTURE DX
	01675	TB FEMALE GEN ORGAN - HISTO DX
	01676	TB FEMALE GEN ORGAN -OTHER TEST
	05411	HERPETIC VULVOVAGINITIS
	05412	HERPETIC ULCERATION OF VULVA
	09815	GONOCOCCAL CERVICITIS (ACUTE)
	09816	GONOCOCCAL ENDOMETRITIS (ACUTE)
	09817	GONOCOCCAL SALPINGITIS ACUTE
	09835	GONOCOCCAL CERVICITIS CHRONIC
	09836	GONOCOCCAL ENDOMETRITIS CHRONIC
	09837	GONOCOCCAL SALPINGITIS(CHRONIC)
	1121	CANDIDIASIS OF VULVA AND VAGINA
	13101	TRICHOMONAL VULVOVAGINITIS
	2180	SUBMUCOUS LEIOMYOMA OF UTERUS
	2181	INTRAMURAL LEIOMYOMA OF UTERUS
	2182	SUBSEROUS LEIOMYOMA OF UTERUS
	2189	LEIOMYOMA OF UTERUS UNSPECIFIED
	2190	BENIGN NEOPLASM OF CERVIX UTERI
	2191	BENIGN NEOPLASM OF CORPUS UTERI
	2198	BEN NEO OTH SPEC PARTS UTERUS
	2199	BENIGN NEOPLASM UTERUS SITE NOS
	220	BENIGN NEOPLASM OF OVARY
	2210	BEN NEO FALLOP TUBE/UT LIGAMENT
	2211	BENIGN NEOPLASM OF VAGINA
	2212	BENIGN NEOPLASM OF VULVA
	2218	OTH SPEC BEN NEO FEMALE GEN ORG
	2219	BEN NEO FEMALE GEN ORG SITE NOS
	2560	HYPERESTROGENISM
	2561	OTHER OVARIAN HYPERFUNCTION
	2562	POSTABLATIVE OVARIAN FAILURE
	2563	OTHER OVARIAN FAILURE
	2564	POLYCYSTIC OVARIES
	2568	OTHER OVARIAN DYSFUNCTION
	2569	UNSPECIFIED OVARIAN DYSFUNCTION
	30651	PSYCHOGENIC VAGINISMUS
	30652	PSYCHOGENIC DYSMENORRHEA
	4566	VULVAL VARICES
	6140	ACUTE SALPINGITIS/OOPHORITIS
	6141	CHRONIC SALPINGITIS/OOPHORITIS
	6142	SALPINGITIS/OOPHORITIS NOS
	6143	AC PARAMETRITIS/PELVIC CELLULIT

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
351-355 DIAG INV & MANAGEMENT GENERAL FEMALE GENITAL DISORDERS		
	6144	CHR/NOS PARAMETR/PELV CELLULIT
	6145	AC/NOS PELV PERITONITIS FEMALE
	6146	PELVIC PERITONEAL ADHES FEMALE
	6147	OTH CHR PELV PERITONITIS FEMALE
	6148	OTH SPEC INFLAM DIS FEMALE PELV
	6149	INFLAM DIS FEMALE PELV ORG NOS
	6150	AC INFLAM DIS UTERUS EXC CERVIX
	6151	CHR INFLAM DIS UTERUS EXC CERVX
	6159	UNSPEC INFLAMMATORY DIS UTERUS
	6160	CERVICITIS AND ENDOCERVICITIS
	61610	VAGINITIS/VULVOVAGINITIS NOS
	61611	VAGINITIS/VULVOVAGINITIS DIS EC
	6162	CYST OF BARTHOLIN'S GLAND
	6163	ABSCESS OF BARTHOLIN'S GLAND
	6164	OTHER ABSCESS OF VULVA
	61650	ULCERATION OF VULVA UNSPEC
	61651	ULCERATION OF VULVA DIS EC
	6168	OTH INFLAM DIS CERVIX/VAG/VULVA
	6169	INFLAM DIS CERVIX/VAG/VULVA NOS
	6170	ENDOMETRIOSIS OF UTERUS
	6171	ENDOMETRIOSIS OF OVARY
	6172	ENDOMETRIOSIS OF FALLOPIAN TUBE
	6173	ENDOMETRIOSIS PELVIC PERITONEUM
	6174	ENDOMETRIOS RECTOVAG SEPTUM/VAG
	6178	ENDOMETRIOSIS OTHER SPEC SITES
	6179	ENDOMETRIOSIS SITE UNSPECIFIED
	6180	PROLAPSE VAG WALLS NO UT PROLAP
	6181	UTERINE PROLAPSE NO VAG PROLAP
	6182	UTEROVAGINAL PROLAPSE INCOMPLET
	6183	UTEROVAGINAL PROLAPSE COMPLETE
	6184	UTEROVAGINAL PROLAPSE UNSPEC
	6185	PROLAP VAG VAULT POST-HYSTERECT
	6186	VAG ENTEROCELE CONGEN/ACQUIRED
	6187	OLD LACN MUSCLES PELVIC FLOOR
	6188	OTHER SPEC GENITAL PROLAPSE
	6189	UNSPECIFIED GENITAL PROLAPSE
	6190	URIN-GEN TRACT FISTULA FEMALE
	6192	GEN TRACT-SKIN FISTULA FEMALE
	6198	OTH SPEC FIST FEMALE GEN TRACT
	6199	UNSPEC FISTULA FEMALE GEN TRACT
	6200	FOLLICULAR CYST OF OVARY
	6201	CORPUS LUTEUM CYST OR HEMATOMA
	6202	OTHER/UNSPECIFIED OVARIAN CYST
	6203	ACQUIR ATROPH OVARY/FALLOP TUBE
	6204	PROLAP/HERNIA OVARY/FALLOP TUBE
	6205	TORSN OVARY/PEDICLE/FALLOP TUBE
	6206	BROAD LIGAMENT LACERATION SYND
	6207	HEMATOMA OF BROAD LIGAMENT
	6208	OTH NONINFLAM DIS OV/TUBE/LIG
	6209	NONINFLAM DIS OV/TUBE/LIG NOS
	6210	POLYP OF CORPUS UTERI
	6211	CHRONIC SUBINVOLUTION OF UTERUS
	6212	HYPERTROPHY OF UTERUS
	6213	ENDOMETRIAL CYSTIC HYPERPLASIA
	6214	HEMATOMETRA
	6215	INTRAUTERINE SYNECHIAE

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
351-355 DIAG INV & MANAGEMENT GENERAL FEMALE GENITAL DISORDERS		
	6216	MALPOSITION OF UTERUS
	6217	CHRONIC INVERSION OF UTERUS
	6218	OTHER SPEC DISORDERS UTERUS NEC
	6219	UNSPECIFIED DISORDER OF UTERUS
	6220	EROSION AND ECTROPION OF CERVIX
	6221	DYSPLASIA OF CERVIX (UTERI)
	6222	LEUKOPLAKIA OF CERVIX (UTERI)
	6223	OLD LACERATION OF CERVIX
	6224	STRICTURE/STENOSIS OF CERVIX
	6225	INCOMPETENCE OF CERVIX
	6226	HYPERTROPHIC ELONGATION CERVIX
	6227	MUCOUS POLYP OF CERVIX
	6228	OTH SPEC NONINFLAM DISORD CERVX
	6229	UNSPEC NONINFLAM DISORD CERVIX
	6230	DYSPLASIA OF VAGINA
	6231	LEUKOPLAKIA OF VAGINA
	6232	STRICTURE OR ATRESIA OF VAGINA
	6233	TIGHT HYMENAL RING
	6234	OLD VAGINAL LACERATION
	6235	LEUKORRHEA NOT SPEC AS INFECT
	6236	VAGINAL HEMATOMA
	6237	POLYP OF VAGINA
	6238	OTH SPEC NONINFLAM DISORD VAG
	6239	UNSPEC NONINFLAM DISORD VAGINA
	6240	DYSTROPHY OF VULVA
	6241	ATROPHY OF VULVA
	6242	HYPERTROPHY OF CLITORIS
	6243	HYPERTROPHY OF LABIA
	6244	OLD LACERATION/SCARRING VULVA
	6245	HEMATOMA OF VULVA
	6246	POLYP OF LABIA AND VULVA
	6248	OTH NONINFLAM DIS VULVA/PERIN
	6249	NONINFLAM DIS VULVA/PERIN NOS
	6250	DYSPAREUNIA
	6251	VAGINISMUS
	6252	MITTELSCHMERZ
	6253	DYSMENORRHEA
	6254	PREMENSTRUAL TENSION SYNDROMES
	6255	PELVIC CONGESTION SYNDROME
	6256	STRESS INCONTINENCE FEMALE
	6258	OTHER SPEC SYMPT FEMALE GEN ORG
	6259	UNSPEC SYMPT FEMALE GEN ORGANS
	6260	ABSENCE OF MENSTRUATION
	6261	SCANTY/INFREQUENT MENSTRUATION
	6262	EXCESSIVE/FREQUENT MENSTRUATION
	6263	PUBERTY BLEEDING
	6264	IRREGULAR MENSTRUAL CYCLE
	6265	OVULATION BLEEDING
	6266	METRORRHAGIA
	6267	POSTCOITAL BLEEDING
	6268	OTH DISORD MENST/ABNORMAL BLEED
	6269	DISORD MENST/ABNORMAL BLEED NOS
	6270	PREMENOPAUSAL MENORRHAGIA
	6271	POSTMENOPAUSAL BLEEDING
	6272	MENOPAUSAL/FEMALE CLIMACT STATE
	6273	POSTMENOPAUSAL ATROPH VAGINITIS

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
351-355 DIAG INV & MANAGEMENT GENERAL FEMALE GENITAL DISORDERS		
	6274	STATE ASSOC W ARTIFIC MENOPAUSE
	6278	OTH MENOPAUSAL/POSTMENOPAUS DIS
	6279	MENOPAUSAL/POSTMENOPAUS DIS NOS
	6280	INFERTILITY FEMALE W ANOVULATN
	6281	INFERT FEMALE PIT-HYPOTHAL ORIG
	6282	INFERTILITY FEMALE TUBAL ORIGIN
	6283	INFERTILITY FEMALE UTERINE ORIG
	6284	INFERT FEMALE CERVICAL/VAG ORIG
	6288	INFERT FEMALE OTHER SPEC ORIGIN
	6289	INFERT FEMALE OF UNSPEC ORIGIN
	6290	HEMATOCELE FEMALE NEC
	6291	HYDROCELE CANAL OF NUCK
	6298	OTH SPEC DISORD FEMALE GEN ORG
	6299	DISORD FEMALE GENITAL ORGAN NOS
	7520	ANOMALIES OF OVARIES
	75210	ANOM FALLOP TUBES/BROAD LIG NOS
	75211	EMBRYON CYST FALLOP TUBE/BR LIG
	75219	OTH ANOM FALLOP TUBES/BROAD LIG
	7522	DOUBLING OF UTERUS
	7523	OTHER ANOMALIES OF UTERUS
	75240	ANOM CERVIX/VAG/EXT F GEN NOS
	75241	EMBRYON CYST CERV/VAG/EXT F GEN
	75242	IMPERFORATE HYMEN
	75249	OTHER ANOM CERVIX/VAG/EXT F GEN
	7950	NONSPEC ABNORM PAP SMEAR CERVIX
	7951	NONSPEC ABNORM OTHER PAP SMEAR
	99632	MECHANICAL COMPLICATION D/T IUD
	V074	POSTMENOPAUSAL HORMONE REPLAC
	V252	STERILIZATION
	V253	MENSTRUAL EXTRACTION
	V260	TUBOPLASTY OR VASOPLASTY AFTER PREV STERIL
	V5042	PROPHYLACTIC OVARY REMOVAL
	V557	ATTENTION TO ARTIFICIAL VAGINA
	V615	MULTIPARITY
	V723	GYNECOLOGICAL EXAMINATION
	V724	PREGNANCY EXAM/TEST UNCONFIRMED

ACCS CELL

356 Management Contraceptive

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
356 MANAGEMENT CONTRACEPTIVE		
	V2501	PRESCRIPTION ORAL CONTRACEPTIVE
	V2502	INITIATN OTH CONTRACEPT MEASURE
	V2509	OTH GEN CONTRACEPT COUNSEL/ADV
	V251	INSERT INTRAUT CONTRACEPT DEV
	V2540	CONTRACEPTIVE SURVEILLANCE NOS
	V2541	SURVEILLANCE CONTRACEPTIVE PILL
	V2542	SURVEIL INTRAUT CONTRACEPT DEV
	V2543	SURVEIL IMPL SUBDERM CONTRACEPT
	V2549	SURVEIL OTH CONTRACEPTIVE METH
	V255	INSRT IMPLANT SUBDERM CONTRACEP
	V258	OTH SPEC CONTRACEPT MANAGEMENT
	V259	UNSPEC CONTRACEPTIVE MANAGEMENT
	V261	ARTIFICIAL INSEMINATION
	V262	PROCREATIVE INVESTIGATION/TEST
	V263	GENETIC COUNSELLING
	V264	GEN PROCREATIVE COUNSEL/ADVICE
	V2651	TUBAL LIGATION STATUS
	V2652	VASECTOMY STATUS
	V268	OTH SPEC PROCREATIVE MANAGEMENT
	V269	UNSPEC PROCREATIVE MANAGEMENT
	V4551	PRESENCE INTRAUT CONTRACEPT DEV
	V4552	PRESENCE SUBDERM CONTRACEPT IMP
	V4559	PRESENCE OTH CONTRACEPTIVE DEV

ACCS CELL
357-360 Diag Inv General Male Genital Disorders

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
357-360 DIAG INV & MANAGEMENT GENERAL MALE GENITAL DISORDERS		
	01640	TB OF EPIDIDYMIS - UNSPEC EXAM
	01641	TB OF EPIDIDYMIS - NO EXAM
	01642	TB OF EPIDIDYMIS - EXAM UNKNOWN
	01643	TB OF EPIDIDYMIS - MICRO DX
	01644	TB OF EPIDIDYMIS - CULTURE DX
	01645	TB OF EPIDIDYMIS - HISTOLOGY DX
	01646	TB OF EPIDIDYMIS - OTHER TEST
	01650	TB MALE GEN ORGANS -UNSPEC EXAM
	01651	TB MALE GEN ORGANS - NO EXAM
	01652	TB MALE GEN ORGANS-EXAM UNKNOWN
	01653	TB MALE GEN ORGANS - MICRO DX
	01654	TB MALE GEN ORGANS - CULTURE DX
	01655	TB MALE GEN ORGANS-HISTOLOGY DX
	01656	TB MALE GEN ORGANS - OTHER TEST
	05413	HERPETIC INFECTION OF PENIS
	0720	MUMPS ORCHITIS
	09812	GONOCOCCAL PROSTATITIS (ACUTE)
	09813	GC EPIDIDYMO-ORCHITIS (ACUTE)
	09814	GC SEMINAL VESICULITIS (ACUTE)
	09832	GONOCOCCAL PROSTATITIS CHRONIC
	09833	GC EPIDIDYMO-ORCHITIS CHRONIC
	09834	GC SEMINAL VESICULITIS CHRONIC
	13103	TRICHOMONAL PROSTATITIS
	2144	LIPOMA OF SPERMATIC CORD
	2220	BENIGN NEOPLASM OF TESTIS
	2221	BENIGN NEOPLASM OF PENIS
	2222	BENIGN NEOPLASM OF PROSTATE
	2223	BENIGN NEOPLASM OF EPIDIDYMIS
	2224	BENIGN NEOPLASM OF SCROTUM
	2228	OTH SPEC BEN NEO MALE GEN ORGAN
	2229	BEN NEO MALE GEN ORGAN SITE NOS
	4564	SCROTAL VARICES
	600	HYPERPLASIA OF PROSTATE
	6010	ACUTE PROSTATITIS
	6011	CHRONIC PROSTATITIS
	6012	ABSCESS OF PROSTATE
	6013	PROSTATOCYSTITIS
	6014	PROSTATITIS IN DISEASES EC
	6018	OTHER SPEC INFLAM DIS PROSTATE
	6019	PROSTATITIS UNSPECIFIED
	6020	CALCULUS OF PROSTATE
	6021	CONGESTION/HEMORRHAGE PROSTATE
	6022	ATROPHY OF PROSTATE
	6028	OTH SPEC DISORDERS OF PROSTATE
	6029	UNSPECIFIED DISORDER PROSTATE
	6030	ENCYSTED HYDROCELE
	6031	INFECTED HYDROCELE
	6038	OTHER SPECIFIED TYPES HYDROCELE
	6039	UNSPECIFIED HYDROCELE
	6040	ORCHITIS/EPID/EPID-ORCH W ABSC
	60490	ORCHITIS/EPIDIDYMITIS UNSPEC
	60491	ORCHITIS/EPIDIDYMITIS DIS EC

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
357-360 DIAG INV & MANAGEMENT GENERAL MALE GENITAL DISORDERS		
	60499	OTH ORCH/EPID/EPID-ORCH NO ABSC
	605	REDUNDANT PREPUCE AND PHIMOSIS
	6060	AZOOSPERMIA
	6061	OLIGOSPERMIA
	6068	MALE INFERT D/T EXTRATEST CAUSE
	6069	MALE INFERTILITY UNSPECIFIED
	6070	LEUKOPLAKIA OF PENIS
	6071	BALANOPOSTHITIS
	6072	OTHER INFLAMMATORY DISORD PENIS
	6073	PRIAPISM
	60781	BALANITIS XEROTICA OBLITERANS
	60782	VASCULAR DISORDERS OF PENIS
	60783	EDEMA OF PENIS
	60784	IMPOTENCE OF ORGANIC ORIGIN
	60789	OTHER SPEC DISORDERS OF PENIS
	6079	UNSPECIFIED DISORDER OF PENIS
	6080	SEMINAL VESICULITIS
	6081	SPERMATOCELE
	6082	TORSION OF TESTIS
	6083	ATROPHY OF TESTIS
	6084	OTH INFLAM DISORD MALE GEN ORG
	60881	DISORDER MALE GEN ORGANS DIS EC
	60883	SPEC VASC DISORD MALE GEN ORGAN
	60884	CHYLOCELE OF TUNICA VAGINALIS
	60885	SPEC STRICTURE MALE GEN ORGANS
	60886	SPEC EDEMA MALE GENITAL ORGANS
	60889	OTH SPEC DISORDERS MALE GEN ORG
	6089	UNSPEC DISORD MALE GENITAL ORG
	75251	UNDESCENDED TESTIS
	75252	RETRACTILE TESTIS
	75261	HYPOSPADIAS
	75262	EPISPADIAS
	75263	CONGENITAL CHORDEE
	75264	MICROPENIS
	75265	HIDDEN PENIS
	75269	OTHER PENILE ANOMALIES
	7528	OTHER SPEC ANOM GENITAL ORGANS
	7587	KLINEFELTER'S SYNDROME
	7922	ABNORMAL FINDINGS IN SEMEN
	V252	STERILIZATION
	V260	TUBOPLASTY/VASOPLASTY PREV STER

ACCS CELL
361-364 Other Genitourological Disorders

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
361-364 DIAG INV & MANAGEMENT OTHER GENITOUROLOGICAL DISORDERS		
	01600	TB OF KIDNEY - UNSPEC EXAM
	01601	TB OF KIDNEY - NO EXAM
	01602	TB OF KIDNEY - EXAM UNKNOWN
	01603	TB OF KIDNEY - MICRO DX
	01604	TB OF KIDNEY - CULTURE DX
	01605	TB OF KIDNEY - HISTOLOGY DX
	01606	TB OF KIDNEY - OTHER TEST
	01610	TB OF BLADDER - UNSPEC EXAM
	01611	TB OF BLADDER - NO EXAM
	01612	TB OF BLADDER - EXAM UNKNOWN
	01613	TB OF BLADDER - MICRO DX
	01614	TB OF BLADDER - CULTURE DX
	01615	TB OF BLADDER - HISTOLOGY DX
	01616	TB OF BLADDER - OTHER TEST
	01620	TB OF URETER - UNSPEC EXAM
	01621	TB OF URETER - NO EXAM
	01622	TB OF URETER - EXAM UNKNOWN
	01623	TB OF URETER - MICRO DX
	01624	TB OF URETER - CULTURE DX
	01625	TB OF URETER - HISTOLOGY DX
	01626	TB OF URETER - OTHER TEST
	01630	TB URINARY ORGAN - UNSPEC EXAM
	01631	TB URINARY ORGAN - NO EXAM
	01632	TB URINARY ORGAN - EXAM UNKNOWN
	01633	TB URINARY ORGAN - MICRO DX
	01634	TB URINARY ORGAN - CULTURE DX
	01635	TB URINARY ORGAN - HISTOLOGY DX
	01636	TB URINARY ORGAN - OTHER TEST
	01690	UNSPEC GU TB - UNSPEC EXAM
	01691	UNSPEC GU TB - NO EXAM
	01692	UNSPEC GU TB - EXAM UNKNOWN
	01693	UNSPEC GU TB - MICRO DX
	01694	UNSPEC GU TB - CULTURE DX
	01695	UNSPEC GU TB - HISTOLOGY DX
	01696	UNSPEC GU TB - OTHER TEST
	03284	DIPHTHERITIC CYSTITIS
	05410	GENITAL HERPES UNSPECIFIED
	05419	OTHER GENITAL HERPES
	07810	UNSPECIFIED VIRAL WARTS
	07811	CONDYLOMA ACUMINATUM
	07819	OTHER SPECIFIED VIRAL WARTS
	0786	HEMORRHAGIC NEPHROSONEPHRITIS
	07888	OTHER SPEC DIS D/T CHLAMYDIAE
	0794	HUMAN PAPILLOMA VIRAL INFECTION
	0901	EARLY CONGEN SYPHILIS LATENT
	0902	EARLY CONGEN SYPHILIS UNSPEC
	0905	OTH LATE CONGEN SYPHILIS SYMPT
	0906	LATE CONGENITAL SYPHILIS LATENT
	0907	LATE CONGENITAL SYPHILIS UNSPEC
	0909	CONGENITAL SYPHILIS UNSPECIFIED
	0910	GENITAL SYPHILIS (PRIMARY)
	0912	OTHER PRIMARY SYPHILIS

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
361-364 DIAG INV & MANAGEMENT OTHER GENITOUROLOGICAL DISORDERS		
	0914	ADENOPATHY D/T SECOND SYPHILIS
	0917	SECONDARY SYPHILIS RELAPSE
	09189	OTHER FORMS SECONDARY SYPHILIS
	0919	UNSPECIFIED SECONDARY SYPHILIS
	0920	EARLY SYPH LATENT SEROL RELAPSE
	0929	EARLY SYPHILIS LATENT UNSPEC
	0954	SYPHILIS OF KIDNEY
	0958	OTH SPEC FORMS LATE SYMPT SYPH
	0959	LATE SYMPT SYPHILIS UNSPEC
	096	LATE SYPHILIS LATENT
	0970	LATE SYPHILIS UNSPECIFIED
	0971	LATENT SYPHILIS UNSPECIFIED
	0979	SYPHILIS UNSPECIFIED
	0980	AC GONOCOCCAL INFECT LOWER GU
	09810	AC GC INFECT UPPER GU UNSPEC
	09811	GONOCOCCAL CYSTITIS (ACUTE)
	09819	OTH ACUTE GC INFECT UPPER GU
	0982	CHR GONOCOCCAL INFECT LOWER GU
	09830	CHR GC INFECT UPPER GU UNSPEC
	09831	GONOCOCCAL CYSTITIS CHRONIC
	09839	OTHER CHR GC INFECT UPPER GU
	0987	GONOCOCCAL INFECT ANUS/RECTUM
	09889	GONOCOCCAL INFECT OTH SPEC SITE
	0990	CHANCROID
	0991	LYMPHOGRANULOMA VENEREUM
	0992	GRANULOMA INGUINALE
	09940	UNS NONGONOCOCCAL URETHRITIS
	09941	CHLAMYD TRACHOMATIS URETHRITIS
	09949	OTHER SPECIFIED URETHRITIS
	09950	CHLAMYDIA TRACH VD: UNSPEC SITE
	09951	CHLAMYDIA TRACH VD: PHARYNX
	09952	CHLAMYD TRACH VD: ANUS & RECTUM
	09953	CHLAMYD TRACH VD: LOWER GU SITE
	09954	CHLAMYD TRACH VD: OTHER GU SITE
	09955	CHLAMYD TRACH VD:UNSPEC GU SITE
	09956	CHLAMYDIA TRACH VD: PERITONEUM
	09959	CHLAMYD TRACH VD: OTH SPEC SITE
	0998	OTHER SPEC VENEREAL DISEASES
	0999	UNSPECIFIED VENEREAL DISEASE
	1032	PINTA LATE LESIONS
	1039	PINTA UNSPECIFIED
	1040	NONVENEREAL ENDEMIC SYPHILIS
	1048	OTH SPEC SPIROCHETAL INFECTIONS
	1049	UNSPEC SPIROCHETAL INFECTION
	1122	CANDIDIASIS OTH UROGENITAL SITE
	1200	SCHISTOSOMA HAEMATOBIUM
	13100	UROGENITAL TRICHOMONIASIS NOS
	13102	TRICHOMONAL URETHRITIS
	13109	OTH UROGENITAL TRICHOMONIASIS
	1318	TRICHOMONIASIS OTHER SITES
	1319	UNSPECIFIED TRICHOMONIASIS
	1372	LATE EFFECTS GU TUBERCULOSIS
	2230	BEN NEOPLASM KIDNEY EXC PELVIS
	2231	BENIGN NEOPLASM OF RENAL PELVIS
	2232	BENIGN NEOPLASM OF URETER
	2233	BENIGN NEOPLASM OF BLADDER

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
361-364 DIAG INV & MANAGEMENT OTHER GENITOUROLOGICAL DISORDERS		
	22381	BENIGN NEOPLASM OF URETHRA
	22389	BEN NEO OTH SPEC URINARY ORGANS
	2239	BEN NEO URINARY ORGANS SITE NOS
	25040	DIABETES W RENAL MAN TYPE II
	25041	DIABETES WITH RENAL MAN TYPE I
	27410	GOUTY NEPHROPATHY UNSPECIFIED
	27411	URIC ACID NEPHROLITHIASIS
	27419	OTHER GOUTY NEPHROPATHY
	2760	HYPEROSMOLALITY/HYPERNATREMIA
	28311	HEMOLYTIC-UREMIC SYNDROME
	30650	PSYCHOGENIC GU MALFUNCTION NOS
	30653	PSYCHOGENIC DYSURIA
	30659	OTH GU MALFUNCT W MENTAL FACTOR
	34461	CAUDA EQUINA W NEUROGENIC BLAD
	40301	MAL HYPERTENS RENAL DIS W RF
	40311	BEN HYPERTENS RENAL DIS W RF
	40391	HYPERTENS RENAL DIS NOS W RF
	40402	MAL HYPERTENS HRT/REN DIS W RF
	40412	BEN HYPERTENS HRT/REN DIS W RF
	40492	HYPERTENS HRT/REN DIS NOS W RF
	4401	ATHEROSCLEROSIS OF RENAL ARTERY
	4421	ANEURYSM OF RENAL ARTERY
	4473	HYPERPLASIA OF RENAL ARTERY
	4533	EMBOLISM/THROMBOSIS RENAL VEIN
	4565	PELVIC VARICES
	5800	AC GLOMERULONEPHRITIS W PROLIF
	5804	ACUTE GLOMERULONEPHRITIS W PROG
	58081	AC GLOMERULONEPHRITIS DIS EC
	58089	AC GLOMERULONEPHRITIS OTH LES
	5809	ACUTE GLOMERULONEPHRITIS UNSPEC
	5810	NEPHROTIC SYND W PROLIF GLOM
	5811	NEPHROTIC SYND MEMBRANOUS GLOM
	5812	NEPHROTIC SYND MEMB-PROLIF GLOM
	5813	NEPHROTIC SYND MIN CHANGE GLOM
	58181	NEPHROTIC SYND IN DISEASES EC
	58189	NEPHROTIC SYND OTH SPEC LESION
	5819	NEPHROTIC SYNDROME UNSPECIFIED
	5820	CHR GLOMERULONEPHRITIS W PROLIF
	5821	CHR GLOMERULONEPH W MEMB GLOM
	5822	CHR GLOM W MEMBRANOPROLIF GLOM
	5824	CHR GLOMERULONEPH W PROG GLOM
	58281	CHR GLOMERULONEPH IN DIS EC
	58289	CHR GLOMERULONEPH W OTH LESION
	5829	CHR GLOMERULONEPHRITIS UNSPEC
	5830	NEPHRITIS/OPATHY W PROLIF GLOM
	5831	NEPHRITIS/OPATHY WITH MEMB GLOM
	5832	NEPHRITIS/OPATHY W MEMB-PROLIF
	5834	NEPHRITIS/OPATHY WITH PROG GLOM
	5836	NEPHRITIS/OPATHY CORT NECROSIS
	5837	NEPHRITIS/OPATHY MEDUL NECROSIS
	58381	NEPHRITIS/OPATHY NOS IN DIS EC
	58389	NEPHRITIS/OPATHY OTH SPEC LES
	5839	NEPHRITIS/OPATHY UNSPEC LESION
	5845	ACUTE RF WITH TUBULAR NECROSIS
	5846	ACUTE RF W RENAL CORT NECROSIS
	5847	ACUTE RF W RENAL MEDUL NECROSIS

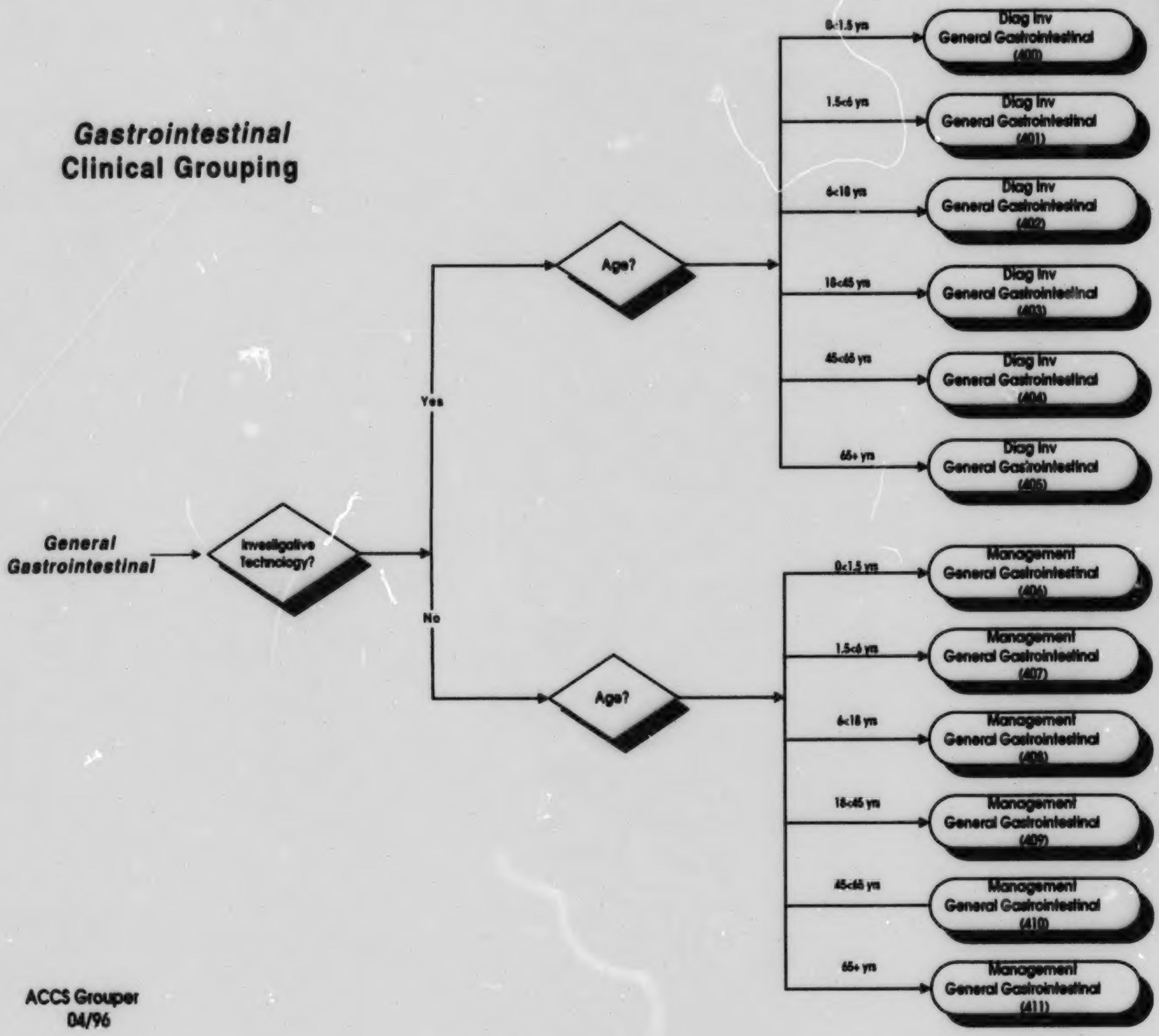
ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
361-364 DIAG INV & MANAGEMENT OTHER GENITOUROLOGICAL DISORDERS		
	5848	ACUTE RF WITH OTHER SPEC LESION
	5849	ACUTE RENAL FAILURE UNSPECIFIED
	585	CHRONIC RENAL FAILURE
	586	RENAL FAILURE UNSPECIFIED
	587	RENAL SCLEROSIS UNSPECIFIED
	5880	RENAL OSTEODYSTROPHY
	5881	NEPHROGENIC DIABETES INSIPIDUS
	5888	OTH DISORD W IMPAIR RENAL FUNCT
	5889	UNSPC DISORD W IMPAIR REN FUNCT
	5890	UNILAT SMALL KIDNEY CAUSE NOS
	5891	BILAT SMALL KIDNEYS CAUSE NOS
	5899	UNSPEC SMALL KIDNEY CAUSE NOS
	59000	CHR PYELONEPH NO MEDUL NECROSIS
	59001	CHR PYELONEPH W MEDUL NECROSIS
	59010	AC PYELONEPH NO MEDUL NECROSIS
	59011	AC PYELONEPH W MEDUL NECROSIS
	5902	RENAL AND PERINEPHRIC ABSCESS
	5903	PYELOURETERITIS CYSTICA
	59080	PYELONEPHRITIS/PYONEPHROSIS NOS
	59081	PYELITIS/PYELONEPH IN DIS EC
	5909	INFECTION OF KIDNEY UNSPECIFIED
	591	HYDRONEPHROSIS
	5920	CALCULUS OF KIDNEY
	5921	CALCULUS OF URETER
	5929	URINARY CALCULUS UNSPECIFIED
	5930	NEPHROPTOSIS
	5931	HYPERTROPHY OF KIDNEY
	5932	CYST OF KIDNEY ACQUIRED
	5933	STRICTURE OR KINKING OF URETER
	5934	OTHER URETERIC OBSTRUCTION
	5935	HYDROURETER
	5936	POSTURAL PROTEINURIA
	59370	VESICOURET REFLUX NO REF NEPHRO
	59371	VESICOURET REFLUX W UNILAT NEPH
	59372	VESICOURET REFLUX W BIL NEPHRO
	59373	OTH VESICOURET REFLUX W NEPHRO
	59381	VASCULAR DISORDERS OF KIDNEY
	59382	URETERAL FISTULA
	59389	OTH SPEC DISORDER KIDNEY/URETER
	5939	UNSPEC DISORDER KIDNEY/URETER
	5940	CALCULUS DIVERTICULUM BLADDER
	5941	OTHER CALCULUS IN BLADDER
	5942	CALCULUS IN URETHRA
	5948	OTH LOW URINARY TRACT CALCULUS
	5949	UNSPEC CALC LOW URINARY TRACT
	5950	ACUTE CYSTITIS
	5951	CHRONIC INTERSTITIAL CYSTITIS
	5952	OTHER CHRONIC CYSTITIS
	5953	TRIGONITIS
	5954	CYSTITIS IN DISEASES EC
	59581	CYSTITIS CYSTICA
	59582	IRRADIATION CYSTITIS
	59589	OTHER SPECIFIED TYPES CYSTITIS
	5959	UNSPECIFIED CYSTITIS
	5960	BLADDER-NECK OBSTRUCTION
	5961	INTESTINOVESICAL FISTULA

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
361-364 DIAG INV & MANAGEMENT OTHER GENITOUROLOGICAL DISORDERS		
	5962	VESICAL FISTULA NEC
	5963	DIVERTICULUM OF BLADDER
	5964	ATONY OF BLADDER
	59651	HYPERTONICITY OF BLADDER
	59652	LOW BLADDER COMPLIANCE
	59653	PARALYSIS OF BLADDER
	59654	NEUROGENIC BLADDER NOS
	59655	DETRUSOR SPHINCTER DYSSYNERGIA
	59659	OTHER FUNCTIONAL DISORD BLADDER
	5966	RUPTURE OF BLADDER NONTRAUMATIC
	5967	HEMORRHAGE INTO BLADDER WALL
	5968	OTHER SPEC DISORDERS OF BLADDER
	5969	UNSPECIFIED DISORDER OF BLADDER
	5970	URETHRAL ABSC NOT SEX TRANSMIT
	59780	URETHRITIS NOS SEX TRANSMIT NOS
	59781	URETHRAL SYNDROME NOS
	59789	OTH URETHRITIS NOT SEX TRANSMIT
	59800	URETHRAL STRICT D/T INFECT NOS
	59801	URETHRAL STRICT D/T INFECT EC
	5981	TRAUMATIC URETHRAL STRICTURE
	5982	POSTOPERATIVE URETHRAL STRICT
	5988	OTHER SPEC URETHRAL STRICTURE
	5989	UNSPECIFIED URETHRAL STRICTURE
	5990	URINARY TRACT INFECT SITE NOS
	5991	URETHRAL FISTULA
	5992	URETHRAL DIVERTICULUM
	5993	URETHRAL CARUNCLE
	5994	URETHRAL FALSE PASSAGE
	5995	PROLAPSED URETHRAL MUCOSA
	5996	URINARY OBSTRUCTION UNSPECIFIED
	5997	HEMATURIA
	59981	URETHRAL HYPERMOBILITY
	59982	INTRINSIC SPHINCTER DEFICIENCY
	59983	URETHRAL INSTABILITY
	59984	OTHER DISORDERS OF URETHRA
	59989	OTH DISORDERS OF URINARY TRACT
	5999	DISORDER URETHRA/URIN TRACT NOS
	7527	INDETERMINATE SEX/PSEUDOHERMAPH
	7529	UNSPEC ANOMALY GENITAL ORGANS
	7530	RENAL AGENESIS AND DYSGENESIS
	75310	CYSTIC KIDNEY DISEASE UNSPEC
	75311	CONGENITAL SINGLE RENAL CYST
	75312	POLYCYSTIC KIDNEY UNSPEC TYPE
	75313	POLYCYSTIC KIDNEY AUTOSOMAL DOM
	75314	POLYCYSTIC KIDNEY AUTOSOMAL REC
	75315	RENAL DYSPLASIA
	75316	MEDULLARY CYSTIC KIDNEY
	75317	MEDULLARY SPONGE KIDNEY
	75319	OTH SPEC CYSTIC KIDNEY DISEASE
	75320	UNSPEC OBST DEFECT OF RENAL PELVIS & URETER
	75321	CONGENITAL OBST OF URETEROPELVIC JUNCTION
	75322	CONGENITAL OBST OF URETEROVESICAL JUNCTION
	75323	CONGENITAL URETEROCELE
	75329	OTH OBST DEFECTS OF RENAL PELVIS AND URETER
	7533	OTHER SPEC ANOMALIES OF KIDNEY
	7534	OTHER SPEC ANOMALIES OF URETER

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
361-384 DIAG INV & MANAGEMENT OTHER GENITOUROLOGICAL DISORDERS		
	7535	EXSTROPHY OF URINARY BLADDER
	7536	ATRES/STENOS URETHRA/BLAD NECK
	7537	ANOMALIES OF URACHUS
	7538	OTHER SPEC ANOM BLADDER/URETHRA
	7539	UNSPEC ANOMALY URINARY SYSTEM
	7586	GONADAL DYSGENESIS
	75881	OTH CONDITIONS D/T SEX CHROMOSOME ANOMALIES
	75889	OTH CONDITIONS D/T CHROMOSOME ANOMALIES
	7880	RENAL COLIC
	7881	DYSURIA
	78820	UNSPECIFIED RETENTION OF URINE
	78821	INCOMPLETE BLADDER EMPTYING
	78829	OTHER SPEC RETENTION OF URINE
	78830	URINARY INCONTINENCE UNSPEC
	78831	URGE INCONTINENCE
	78832	STRETT INCONTINENCE MALE
	78833	MIXED INCONTINENCE(MALE/FEMALE)
	78834	INCONTINENCE NO SENSORY AWARE
	78835	POST-VOID DRIBBLING
	78836	NOCTURNAL ENURESIS
	78837	CONTINUOUS LEAKAGE
	78839	OTHER URINARY INCONTINENCE
	78841	URINARY FREQUENCY
	78842	POLYURIA
	78843	NOCTURIA
	7885	OLIGURIA AND ANURIA
	78861	SPLITTING OF URINARY STREAM
	78862	SLOWING OF URINARY STREAM
	78869	OTHER ABNORMALITY OF URINATION
	7887	URETHRAL DISCHARGE
	7888	EXTRAVASATION OF URINE
	7889	OTHER SYMPTOMS URINARY SYSTEM
	7910	PROTEINURIA
	7912	HEMOGLOBINURIA
	7913	MYOGLOBINURIA
	7914	BILIURIA
	7915	GLYCOSURIA
	7916	ACETONURIA
	7917	OTHER CELLS AND CASTS IN URINE
	7919	OTH NONSPEC FINDINGS EXAM URINE
	7935	NONSPEC ABNORM FINDING GU TRACT
	7944	NONSPEC ABNORM KIDNEY FUNCTION
	7949	NONSPEC ABNORM OTH FUNCT STUDY
	99630	MECH COMPL GU DEV/IMPL/GRF NOS
	99631	MECH COMPL URETHRAL CATHETER
	99639	MECH COMPL OTH GU DEV/IMPL/GRF
	99656	MECH COMPL PERITONEAL DIAL CATH
	99668	INFECT D/T PERITONEAL DIAL CATH
	99664	INFECT/INFLAM INDWELL URIN CATH
	99665	INFECT/INFLAM GU DEV/IMPL/GRAFT
	99676	OTH COMPL GU DEVICE/IMPL/GRAFT
	99681	COMPLICATION TRANSPLANT KIDNEY
	9975	URINARY COMPLICATIONS
	V420	KIDNEY REPLACED BY TRANSPLANT
	V435	BLADDER REPLACED BY OTHER MEANS
	V474	OTHER URINARY PROBLEMS

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
361-364 DIAG INV & MANAGEMENT OTHER GENITOUROLOGICAL DISORDERS		
	V475	OTHER GENITAL PROBLEMS
	V536	FITTING/ADJUST URINARY DEVICES
	V555	ATTENTION TO CYSTOSTOMY
	V556	ATTENTN OTH ARTIFIC OPEN URIN
	V560	ENCOUNTER EXTRACORP DIALYSIS
	V561	FIT & ADJUST DIALYSIS CATHETER
	V562	FIT/ADJUST PERITONEAL DIAL CATH
	V568	ENCOUNTER FOR OTHER DIALYSIS
	V5882	FIT & ADJUST NON-VASC CATH NEC

Gastrointestinal
Clinical Grouping


General Gastrointestinal
Investigative Technology?
Yes
No
Age?
0<1.5 yrs
Diag Inv General Gastrointestinal (400)
1.5<6 yrs
Diag Inv General Gastrointestinal (401)
6<18 yrs
Diag Inv General Gastrointestinal (402)
18<45 yrs
Diag Inv General Gastrointestinal (403)
45<65 yrs
Diag Inv General Gastrointestinal (404)
65+ yrs
Diag Inv General Gastrointestinal (405)
Age?
0<1.5 yrs
Management General Gastrointestinal (406)
1.5<6 yrs
Management General Gastrointestinal (407)
6<18 yrs
Management General Gastrointestinal (408)
18<45 yrs
Management General Gastrointestinal (409)
45<65 yrs
Management General Gastrointestinal (410)
65+ yrs
Management General Gastrointestinal (411)

ACCS Grouper
04/96

ACCS CELL
400-411 General Gastrointestinal

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
400-411 DIAG INV & MANAGEMENT GENERAL GASTROINTESTINAL		
	0010	CHOLERA DUE TO VIBRIO CHOLERAE
	0011	CHOLERA D/T VIBRIO CHOL EL TOR
	0019	CHOLERA UNSPECIFIED
	0030	SALMONELLA GASTROENTERITIS
	0040	SHIGELLA DYSENTERIAE
	0041	SHIGELLA FLEXNERI
	0042	SHIGELLA BOYDII
	0043	SHIGELLA SONNEI
	0048	OTHER SPEC SHIGELLA INFECTION
	0049	UNSPECIFIED SHIGELLOSIS
	0050	STAPHYLOCOCCAL FOOD POISONING
	0052	FOOD POISON D/T CLPERFRINGENS
	0053	FOOD POISON D/T OTH CLOSTRIDIA
	0054	FD POIS D/T VIBRIA PARAHAEMOLYT
	00581	FOOD POISONING D/T VIBRIN VULNIFIC
	00589	OTHER BACTERIAL FOOD POISONING
	0059	FOOD POISONING UNSPECIFIED
	0060	AC AMEBIC DYSENTERY NO ABSCESS
	0061	CHR INTEST AMEBIASIS NO ABSCESS
	0062	AMEBIC NONDYSENTERIC COLITIS
	0070	BALANTIDIASIS
	0071	GIARDIASIS
	0072	COCCIDIOSIS
	0073	INTESTINAL TRICHOMONIASIS
	0074	CRYPTOSPORIDOSIS
	0078	OTH PROTOZOAL INTEST DISEASES
	0079	UNSPEC PROTOZOAL INTEST DISEASE
	00800	UNSPEC E COLI ENTERITIS
	00801	ENTEROPATH E COLI ENTERITIS
	00802	ENTEROTOX E COLI ENTERITIS
	00803	ENTEROINVASIVE ECOLI ENTERITIS
	00804	ENTEROHEMORR E COLI ENTERITIS
	00809	OTH INTEST E COLI INFECTIONS
	0081	ARIZONA ENTERITIS
	0082	AEROBACTER AEROGENES ENTERITIS
	0083	PROTEUS MIRAB/MORGANI ENTERITIS
	00841	STAPHYLOCOCCUS ENTERITIS
	00842	PSEUDOMONAS ENTERITIS
	00843	CAMPYLOBACTER ENTERITIS
	00844	YERSINIA ENTEROCOLIT ENTERITIS
	00845	CLOSTRIDIUM DIFFICILE ENTERITIS
	00846	OTHER ANAEROBIC ENTERITIS
	00847	OTH GRAM-NEG BACT ENTERITIS
	00849	OTH SPEC BACTERIAL ENTERITIS
	0085	BACTERIAL ENTERITIS UNSPECIFIED
	00861	ENTERITIS D/T ROTAVIRUS
	00862	ENTERITIS D/T ADENOVIRUS
	00863	ENTERITIS D/T NORWALK VIRUS
	00864	ENTER D/T OTH SM ROUND VIRUSES
	00865	ENTERITIS D/T CALCIVIRUS
	00866	ENTERITIS D/T ASTROVIRUS
	00867	ENTERITIS D/T ENTEROVIRUS NEC

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
400-411 DIAG INV & MANAGEMENT GENERAL GASTROINTESTINAL		
	00869	ENTERITIS D/T OTHER VIRUS
	0088	ENTERITIS D/T OTH ORGANISM NEC
	0090	INFECT COLITIS ENTERIT GASTRO
	0091	COLIT ENTER GASTRO PRES INFECT
	0092	INFECTIOUS DIARRHEA
	0093	DIARRHEA PRESUM INFECTIOUS ORIG
	01480	TB INTEST PER MES - UNSPEC EXAM
	01481	TB INTEST PER MES - NO EXAM
	01482	TB INTEST PER MES-EXAM UNKNOWN
	01483	TB INTEST PER MES - MICRO DX
	01484	TB INTEST PER MES - CULTURE DX
	01485	TB INTEST PER MES-HISTOLOGY DX
	01486	TB INTEST PER MES - OTHER TEST
	01780	TB OF ESOPHAGUS - UNSPEC EXAM
	01781	TB OF ESOPHAGUS - NO EXAM
	01782	TB OF ESOPHAGUS - EXAM UNKNOWN
	01783	TB OF ESOPHAGUS - MICRO DX
	01784	TB OF ESOPHAGUS - CULTURE DX
	01785	TB OF ESOPHAGUS - HISTOLOGY DX
	01786	TB OF ESOPHAGUS - OTHER TEST
	0211	ENTERIC TULAREMIA
	0222	GASTROINTESTINAL ANTHRAX
	03283	DIPHTHERITIC PERITONITIS
	0392	ABDOMINAL ACTINOMYCOTIC INFECT
	0402	WHIPPLE'S DISEASE
	05471	VISCERAL HERPES SIMPLEX
	07882	EPIDEMIC VOMITING SYNDROME
	0911	PRIMARY ANAL SYPHILIS
	09169	SECONDARY SYPHILIS OTH VISCERA
	1230	TAENIA SOLIUM INFECT INTESTINAL
	1231	CYSTICERCOSIS
	1232	TAENIA SAGINATA INFECTION
	1233	TAENIASIS UNSPECIFIED
	1234	DIPHYLLOBOTHRIASIS INTESTINAL
	1235	SPARGANOSIS
	1236	HYMENOLEPIASIS
	1238	OTHER SPEC CESTODE INFECTION
	1239	UNSPECIFIED CESTODE INFECTION
	1260	ANCYLOSTOMA DUODENALE
	1261	NECATOR AMERICANUS
	1262	ANCYLOSTOMA BRAZILIENSE
	1263	ANCYLOSTOMA CEYLANICUM
	1268	OTHER SPECIFIED ANCYLOSTOMA
	1269	UNSPEC ANCYLOSTOM/NECATORIASIS
	1270	ASCARIASIS
	1271	ANISAKIASIS
	1272	STRONGYLOIDIASIS
	1273	TRICHURIASIS
	1274	ENTEROBIASIS
	1275	CAPILLARIASIS
	1276	TRICHOSTRONGYLIASIS
	1277	OTHER INTESTINAL HELMINTHIASIS
	1279	INTESTINAL HELMINTHIASIS UNSPEC
	129	INTESTINAL PARASITISM UNSPEC
	2110	BENIGN NEOPLASM OF ESOPHAGUS
	2111	BENIGN NEOPLASM OF STOMACH

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
400-411 DIAG INV & MANAGEMENT GENERAL GASTROINTESTINAL		
	2112	BENIGN NEOPLASM SMALL INTESTINE
	2113	BENIGN NEOPLASM OF COLON
	2114	BEN NEOPLASM RECTUM/ANAL CANAL
	2118	BEN NEOPLASM RETRO/PERITONEUM
	2119	BEN NEO DIGEST SYS OTH/UNSPEC
	2143	LIPOMA OF INTRAABDOMINAL ORGANS
	22804	HEMANGIOMA INTRAABD STRUCTURES
	2515	ABNORMAL SECRETION OF GASTRIN
	2712	HEREDITARY FRUCTOSE INTOLERANCE
	2713	INTEST DISACCHARID DEFIC/MALABS
	27800	OBESITY, UNSPECIFIED
	27801	MORBID OBESITY
	2892	NONSPEC MESENTER LYMPHADENITIS
	3064	GI MALFUNCTION W MENTAL FACTORS
	4474	CELIAC ARTERY COMPRESSION SYND
	4550	INTERNAL HEMORRHOIDS NO COMPL
	4551	INTERNAL THROMBOSED HEMORRHOIDS
	4552	INTERNAL HEMORRHOID W OTH COMPL
	4553	EXTERNAL HEMORRHOIDS NO COMPL
	4554	EXTERNAL THROMBOSED HEMORRHOIDS
	4555	EXTERNAL HEMORRHOID W OTH COMPL
	4556	UNSPEC HEMORRHOIDS NO COMPL
	4557	UNSPEC THROMBOSED HEMORRHOIDS
	4558	UNSPEC HEMORRHOIDS W OTH COMPL
	4559	RESIDUAL HEMORRHOIDAL SKIN TAGS
	4561	ESOPHAGEAL VARICES NO BLEEDING
	45621	ESOPH VARICES DIS EC NO BLEED
	5200	ANODONTIA
	5201	SUPERNUMERARY TEETH
	5202	ABNORMALITIES SIZE/FORM TEETH
	5203	MOTTLED TEETH
	5204	DISTURBANCES OF TOOTH FORMATION
	5205	HERED DISTURB TOOTH STRUCT NEC
	5206	DISTURBANCES IN TOOTH ERUPTION
	5207	TEETHING SYNDROME
	5208	OTH DISORDERS TOOTH DEVEL/ERUPT
	5209	UNSPEC DISORD TOOTH DEVEL/ERUPT
	5210	DENTAL CARIES
	5211	EXCESSIVE ATTRITION OF TEETH
	5212	ABRASION OF TEETH
	5213	EROSION OF TEETH
	5214	PATHOLOGICAL RESORPTION TEETH
	5215	HYPERCEMENTOSIS OF TEETH
	5216	ANKYLOSIS OF TEETH
	5217	POSTERUPTIVE COLOR CHANGE TEETH
	5218	OTH SPEC DIS HARD TISSUES TEETH
	5219	UNSPEC DIS HARD TISSUE OF TEETH
	5220	PULPITIS
	5221	NECROSIS OF THE PULP
	5222	PULP DEGENERATION
	5223	ABNORM HARD TISSUE FORMAT PULP
	5224	AC APICAL PERIODONTIT PULP ORIG
	5225	PERIAPICAL ABSCESS NO SINUS
	5226	CHRONIC APICAL PERIODONTITIS
	5227	PERIAPICAL ABSCESS WITH SINUS
	5228	RADICULAR CYST

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
400-411 DIAG INV & MANAGEMENT GENERAL GASTROINTESTINAL		
	5229	OTH/UNSPEC DIS PULP/PERIAPICAL
	5230	ACUTE GINGIVITIS
	5231	CHRONIC GINGIVITIS
	5232	GINGIVAL RECESSION
	5233	ACUTE PERIODONTITIS
	5234	CHRONIC PERIODONTITIS
	5235	PERIODONTOSIS
	5236	ACCRETIONS ON TEETH
	5238	OTHER SPEC PERIODONTAL DISEASES
	5239	UNSPEC GINGIVAL/PERIODONTAL DIS
	5242	ANOMALIES OF DENTAL ARCH RELAT
	5243	ANOMALIES OF TOOTH POSITION
	5244	MALOCCLUSION UNSPECIFIED
	5245	DENTOFACIAL FUNCTIONAL ABNORM
	52460	TEMPOROMAND JOINT DISORD UNSPEC
	52461	ADHES & ANKYL(BONY/FIBR) OF TMJ
	52462	ARTHRALGIA TEMPOROMANDIB JOINT
	52463	ART DISC DIS(REDUC/NON-RED)TMJ
	52469	OTHER SPECIFIED TMJ DISORDERS
	52470	UNSPECIFIED ALVEOLAR ANOMALY
	52471	ALVEOLAR MAXILLARY HYPERPLASIA
	52472	ALVEOLAR MANDIBULAR HYPERPLASIA
	52473	ALVEOLAR MAXILLARY HYPOPLASIA
	52474	ALVEOLAR MANDIBULAR HYPOPLASIA
	52479	OTH SPECIFIED ALVEOLAR ANOMALY
	5248	OTH SPEC DENTOFACIAL ANOMALIES
	5249	UNSPECIFIED DENTOFACIAL ANOMALY
	5250	EXFOLIATION TEETH D/T SYS CAUSE
	5251	LOSS TEETH ACCID/EXTRC/PERIODON
	5252	ATROPHY EDENTUL ALVEOLAR RIDGE
	5253	RETAINED DENTAL ROOT
	5258	OTH DIS TEETH/SUPPORT STRUCTURE
	5259	UNSPEC DIS TEETH/SUPPORT STRUCT
	5260	DEVELOPMENTAL ODONTOGENIC CYSTS
	5300	ACHALASIA AND CARDIOSPASM
	53010	UNSPECIFIED ESOPHAGITIS
	53011	REFLUX ESOPHAGITIS
	53019	OTHER ESOPHAGITIS
	5302	ULCER OF ESOPHAGUS
	5303	STRICTURE/STENOSIS OF ESOPHAGUS
	5305	DYSKINESIA OF ESOPHAGUS
	5306	DIVERTICULUM ESOPHAGUS ACQUIRED
	53081	ESOPHAGEAL REFLUX
	53083	ESOPHAGEAL LEUKOPLAKIA
	53084	TRACHEOESOPHAGEAL FISTULA
	53089	OTH SPEC DISORDERS OF ESOPHAGUS
	5309	UNSPECIFIED DISORDER ESOPHAGUS
	53130	ACUTE GASTRIC ULCER NO HEM/PERF
	53170	CHR GASTRIC ULCER NO HEM/PERF
	53190	GASTRIC ULCER NOS NO HEM/PERF
	53230	AC DUODENAL ULCER NO HEM/PERF
	53270	CHR DUODENAL ULCER NO HEM/PERF
	53290	DUODENAL ULCER NOS NO HEM/PERF
	53300	ACUTE PEPTIC ULCER W HEMORRHAGE
	53370	CHRONIC PEPTIC ULC NO HEM/PERF
	53390	PEPTIC ULCER NOS NO HEM/PERF

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
400-411 DIAG INV & MANAGEMENT GENERAL GASTROINTESTINAL		
	53430	AC GASTROJEJ ULCER NO HEM/PERF
	53470	CHR/NOS GASTJEJ ULC NO HEM/PERF
	53490	GASTROJEJ ULCER NOS NO HEM/PERF
	53500	ACUTE GASTRITIS NO HEMORRHAGE
	53510	ATROPHIC GASTRITIS NO HEMORRHAG
	53520	GASTR MUC HYPERTR NO HEMORRHAGE
	53530	ALCOHOLIC GASTRIT NO HEMORRHAGE
	53540	OTH SPEC GASTRIT NO HEMORRHAGE
	53550	UNS GAST/GASTDUODENITIS NO HEM
	53560	DUODENITIS NO HEMORRHAGE
	5360	ACHLORHYDRIA
	5361	ACUTE DILATATION OF STOMACH
	5362	PERSISTENT VOMITING
	5363	GASTROPARESIS
	53640	GASTROSTOMY COMPLICATION UNIS
	53641	INFECTION OF GASTROSTOMY
	53642	MECHANICAL COMPL OF GASTROSTO
	53649	OTHER GASTROSTOMY COMPLICATIONS
	53640	GASTROSTOMY COMPLICATION UNS
	53641	INFECTION OF GASTROSTOMY
	53642	MECHANICAL COMPL OF GASTROSTOMY
	53649	OTHER GASTROSTOMY COMPLICATIONS
	5368	DYSPEP/OTH DISORD FUNCT STOMACH
	5369	UNSPEC DISORD FUNCTION STOMACH
	5370	ACQUIR HYPERTROPH PYLOR STENOS
	5371	GASTRIC DIVERTICULUM
	5372	CHRONIC DUODENAL ILEUS
	5373	OTHER OBSTRUCTION OF DUODENUM
	5374	FISTULA OF STOMACH OR DUODENUM
	5375	GASTROPTOSIS
	5376	HOURGLASS STRICT/STENOS STOMACH
	53781	PYLOROSPASM
	53782	ANGIODYS STOMACH/DUOD (NO HEM)
	53783	ANGIODYSPLASIA STOM/DUOD W HEM
	53789	OTH SPEC DISORDERS STOMACH/DUOD
	5379	UNSPEC DISORD STOMACH/DUODENUM
	5409	AC APPENDICITIS NO PERITONITIS
	541	APPENDICITIS UNQUALIFIED
	542	OTHER APPENDICITIS
	5430	HYPERPLASIA APPENDIX (LYMPHOID)
	5439	OTHER/UNSPEC DISEASES APPENDIX
	55000	ING HERNIA W GANGR UNILAT/NOS
	55001	ING HERNIA W GANGR UNILAT/RECUR
	55002	ING HERNIA W GANGR BILAT/NOS
	55003	ING HERNIA W GANGR BILAT/RECUR
	55010	ING HERNIA W OBST UNILAT/NOS
	55011	ING HERNIA W OBST UNILAT/RECUR
	55012	ING HERNIA W OBSTRUCT BILAT/NOS
	55013	ING HERNIA W OBST BILAT/RECUR
	55090	INGUINAL HERNIA NOS UNILAT/NOS
	55091	ING HERNIA NOS UNILAT/RECUR
	55092	INGUINAL HERNIA NOS BILAT/NOS
	55093	INGUINAL HERNIA NOS BILAT/RECUR
	55100	FEM HERNIA W GANGR UNILAT/NOS
	55101	FEM HERNIA W GANGR UNILAT/RECUR
	55102	FEM HERNIA W GANGR BILAT/NOS

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
400-411 DIAG INV & MANAGEMENT GENERAL GASTROINTESTINAL		
	55103	FEM HERNIA W GANGR BILAT/RECUR
	5511	UMBILICAL HERNIA WITH GANGRENE
	55120	VENTRAL HERNIA NOS W GANGRENE
	55121	INCISIONAL HERNIA WITH GANGRENE
	55129	OTHER VENTRAL HERNIA W GANGRENE
	5513	DIAPHRAGMATIC HERNIA W GANGRENE
	5518	OTHER SPEC HERNIA WITH GANGRENE
	5519	UNSPEC HERNIA WITH GANGRENE
	55300	FEMORAL HERNIA NOS UNILAT/NOS
	55301	FEMORAL HERNIA NOS UNILAT/RECUR
	55302	FEMORAL HERNIA NOS BILAT/NOS
	55303	FEMORAL HERNIA NOS BILAT/RECUR
	5531	UMBILICAL HERNIA NOS
	55320	VENTRAL HERNIA NOS
	55321	INCISIONAL HERNIA NOS
	55329	OTHER VENTRAL HERNIA NOS
	5533	DIAPHRAGMATIC HERNIA NOS
	5538	HERNIA OTHER SPECIFIED SITE NOS
	5539	HERNIA UNSPECIFIED SITE NOS
	5550	REGIONAL ENTERITIS SMALL INTEST
	5551	REGIONAL ENTERITIS LARGE INTEST
	5552	REG ENTERIT SMALL/LARGE INTEST
	5559	REGIONAL ENTERITIS UNSPEC SITE
	5560	ULCERATIVE ENTEROCOLITIS
	5561	ULCERATIVE ILEOCOLITIS
	5562	ULCERATIVE PROCTITIS
	5563	ULCERATIVE PROCTOSIGMOIDITIS
	5564	PSEUDOPOLYPOSIS OF COLON
	5565	LEFT-SIDED ULCERATIVE COLITIS
	5566	UNIVERSAL ULCERATIVE COLITIS
	5568	OTHER ULCERATIVE COLITIS
	5569	ULCERATIVE COLITIS UNSPECIFIED
	5570	ACUTE VASC INSUFFICIENCY INTEST
	5571	CHR VASC INSUFFICIENCY INTEST
	5579	VASC INSUFFICIENCY INTEST NOS
	5581	GASTRO/COLITIS D/T RADIATION
	5582	TOXIC GASTROENTERITIS/COLITIS
	5589	OTH/NOS NONINFECT GASTRO/COLIT
	56200	DIVERTICULOS SM INTEST (NO HEM)
	56201	DIVERTICULIT SM INTEST (NO HEM)
	56202	DIVERTICULOSIS SM INTEST W HEM
	56203	DIVERTICULITIS SM INTEST W HEM
	56210	DIVERTICULOSIS COLON (NO HEM)
	56211	DIVERTICULITIS COLON (NO HEM)
	56212	DIVERTICULOSIS COLON W HEM
	56213	DIVERTICULITIS OF COLON W HEM
	5640	CONSTIPATION
	5641	IRRITABLE COLON
	5642	POSTGASTRIC SURGERY SYNDROMES
	5643	VOMITING FOLLOWING GI SURGERY
	5644	OTHER POSTOP GI FUNCT DISORDERS
	5645	FUNCTIONAL DIARRHEA
	5646	ANAL SPASM
	5647	MEGACOLON NOT HIRSCHSPRUNG'S
	56481	NEUROGENIC BOWEL
	56489	OTH FUNCTIONAL DISORD INTESTINE

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
400-411 DIAG INV & MANAGEMENT GENERAL GASTROINTESTINAL		
	5649	UNSPEC FUNCT DISORDER INTESTINE
	5650	ANAL FISSURE
	5651	ANAL FISTULA
	566	ABSCESS ANAL AND RECTAL REGIONS
	5680	PERITONEAL ADHESIONS
	56881	HEMOPERITONEUM (NONTRAUMATIC)
	56882	PERITONEAL EFFUSION (CHRONIC)
	56889	OTHER SPEC DISORDERS PERITONEUM
	5689	UNSPEC DISORDER OF PERITONEUM
	5690	ANAL AND RECTAL POLYP
	5691	RECTAL PROLAPSE
	5692	STENOSIS OF RECTUM AND ANUS
	56941	ULCER OF ANUS AND RECTUM
	56942	ANAL OR RECTAL PAIN
	56949	OTH SPEC DISORDERS RECTUM/ANUS
	5695	ABSCESS OF INTESTINE
	56960	UNSPEC COMPL OF COLOSTOMY & ENTERO
	56961	INFECTION OF COLOSTOMY OR ENTEROST
	56962	MECH COMPL COLOSTOMY/ENTEROSTOM
	56969	OTHER COMPL OF COLOSTOMY & ENTEROS
	56981	FISTULA INTEST EXC RECTUM/ANUS
	56982	ULCERATION OF INTESTINE
	56984	ANGIODYSPLASIA INTEST (NO HEM)
	56985	ANGIODYSPLASIA INTESTINE W HEM
	56989	OTHER SPEC DISORDERS INTESTINE
	5699	UNSPEC DISORDER OF INTESTINE
	5781	BLOOD IN STOOL
	5790	CELIAC DISEASE
	5791	TROPICAL SPRUE
	5792	BLIND LOOP SYNDROME
	5793	OTH/UNSPEC POSTOP NONABSORPTION
	5794	PANCREATIC STEATORRHEA
	5798	OTH SPEC INTEST MALABSORPTION
	5799	UNSPEC INTESTINAL MALABSORPTION
	6175	ENDOMETRIOSIS OF INTESTINE
	6191	DIGEST-GEN TRACT FISTULA FEMALE
	7503	TRACH-ESOPH FIST/ATRESIA/STENOS
	7504	OTHER SPEC ANOMALIES ESOPHAGUS
	7505	CONGEN HYPERTROPH PYLOR STENOS
	7506	CONGENITAL HIATUS HERNIA
	7507	OTH SPECIFIED ANOMALIES STOMACH
	7508	OTH SPEC ANOM UPPER ALIMENTARY
	7509	UNSPEC ANOMALY UPPER ALIMENTARY
	7510	MECKEL'S DIVERTICULUM
	7511	ATRESIA/STENOS SMALL INTESTINE
	7512	ATRES/STENOS LRG INTEST/RECT/AN
	7513	HIRSCH DIS/CONGEN FUNCT DIS COL
	7514	ANOMALIES INTESTINAL FIXATION
	7515	OTHER ANOMALIES OF INTESTINE
	7518	OTH SPEC ANOM DIGESTIVE SYSTEM
	7519	UNSPEC ANOM DIGESTIVE SYSTEM
	75670	ANOMALY OF ABDOMINAL WALL,UNSPECIFIED
	75671	PRUNE BELLY SYNDROME
	75679	OTHER CONGENITAL ANOMALIES OF ABDOMINAL WALL
	7593	SITUS INVERSUS
	7832	ABNORMAL LOSS OF WEIGHT

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
400-411 DIAG INV & MANAGEMENT GENERAL GASTROINTESTINAL		
	7833	FEEDING DIFFICULTIES/MISMANAGE
	7848	HEMORRHAGE FROM THROAT
	78701	NAUSEA WITH VOMITING
	78702	NAUSEA ALONE
	78703	VOMITING ALONE
	7871	HEARTBURN
	7872	DYSPHAGIA
	7874	VISIBLE PERISTALSIS
	7875	ABNORMAL BOWEL SOUNDS
	7876	INCONTINENCE OF FECES
	7877	ABNORMAL FECES
	78791	DIARRHEA
	78799	OTHER SYMP INVOLVING DIGESTIVE SYS
	78900	ABDOMINAL PAIN UNSPECIFIED SITE
	78901	ABDOMINAL PAIN RIGHT UPPER QUAD
	78902	ABDOMINAL PAIN LEFT UPPER QUAD
	78903	ABDOMINAL PAIN RIGHT LOWER QUAD
	78904	ABDOMINAL PAIN LEFT LOWER QUAD
	78905	ABDOMINAL PAIN PERIUMBILIC
	78906	ABDOMINAL PAIN EPIGASTRIC
	78907	ABDOMINAL PAIN GENERALIZED
	78909	ABDOMINAL PAIN OTHER SPEC SITE
	78930	ABDOM/PELVIC SWEL/MASS UNS SITE
	78931	ABDOMINAL/PELVIC SWELL/MASS RUQ
	78932	ABDOMINAL/PELVIC SWELL/MASS LUQ
	78933	ABDOMINAL/PELVIC SWELL/MASS RLQ
	78934	ABDOMINAL/PELVIC SWELL/MASS LLQ
	78935	ABDOM/PELVIC SWELL/MASS PERIUMB
	78936	ABDOM/PELVIC SWELL/MASS EPIGAST
	78937	ABDOM/PELVIC SWELL/MASS GENERAL
	78939	ABDOM/PELVIC SWEL/MASS OTH SITE
	78940	ABDOMINAL RIGIDITY UNSPEC SITE
	78941	ABDOMINAL RIGIDITY RUQ
	78942	ABDOMINAL RIGIDITY LUQ
	78943	ABDOMINAL RIGIDITY RLQ
	78944	ABDOMINAL RIGIDITY LLQ
	78945	ABDOMINAL RIGIDITY PERIUMBILIC
	78946	ABDOMINAL RIGIDITY EPIGASTRIC
	78947	ABDOMINAL RIGIDITY GENERALIZED
	78949	ABDOMINAL RIGID OTH SPEC SITE
	78960	ABDOMINAL TENDERNESS UNS SITE
	78961	ABDOMINAL TENDERNESS RUQ
	78962	ABDOMINAL TENDERNESS LUQ
	78963	ABDOMINAL TENDERNESS RLQ
	78964	ABDOMINAL TENDERNESS LLQ
	78965	ABDOMINAL TENDERNESS PERIUMB
	78966	ABDOMINAL TENDERNESS EPIGASTRIC
	78967	ABDOM TENDERNESS GENERALIZED
	78969	ABDOM TENDERNESS OTH SPEC SITE
	7899	OTHER SYMPTOMS ABDOMEN/PELVIS
	7994	CACHEXIA
	9974	GASTROINTESTINAL COMPLICATIONS
	V416	PROBLEMS SWALLOWING/MASTICATION
	V4283	ORGAN OR TISSUE REPLACED BY TRANSPLANT PANCREAS
	V4289	ORGAN OR TISSUE REPLACED BY TRANSPLANT OF OTHER SPECIFIED ORGAN OR TISSUE

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
400-411 DIAG INV & MANAGEMENT GENERAL GASTROINTESTINAL		
	V523	FIT/ADJUST DENTAL PROSTH DEV
	V534	FITTING/ADJUST ORTHODONTIC DEV
	V535	FIT/ADJUST ILEOSTOMY/INTEST APP
	V551	ATTENTION TO GASTROSTOMY
	V552	ATTENTION TO ILEOSTOMY
	V553	ATTENTION TO COLOSTOMY
	V554	ATTENTN OTH ARTIFIC OPEN DIGEST
	V585	ORTHODONTICS AFTERCARE
	V653	DIETARY SURVEILLANCE/COUNSEL
	V722	DENTAL EXAMINATION

ACCS CELL
412 Constipation with Disimpaction

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
412 CONSTIPATION WITH DISIMPACTION		
	5640	CONSTIPATION

When ICD-9-CM diagnosis code 5640 (Constipation) is used in conjunction with ICD-9-CM intervention code 9638, (Removal of Impacted Feces), the case is grouped onto ACCS cell 412 Constipation with Disimpaction

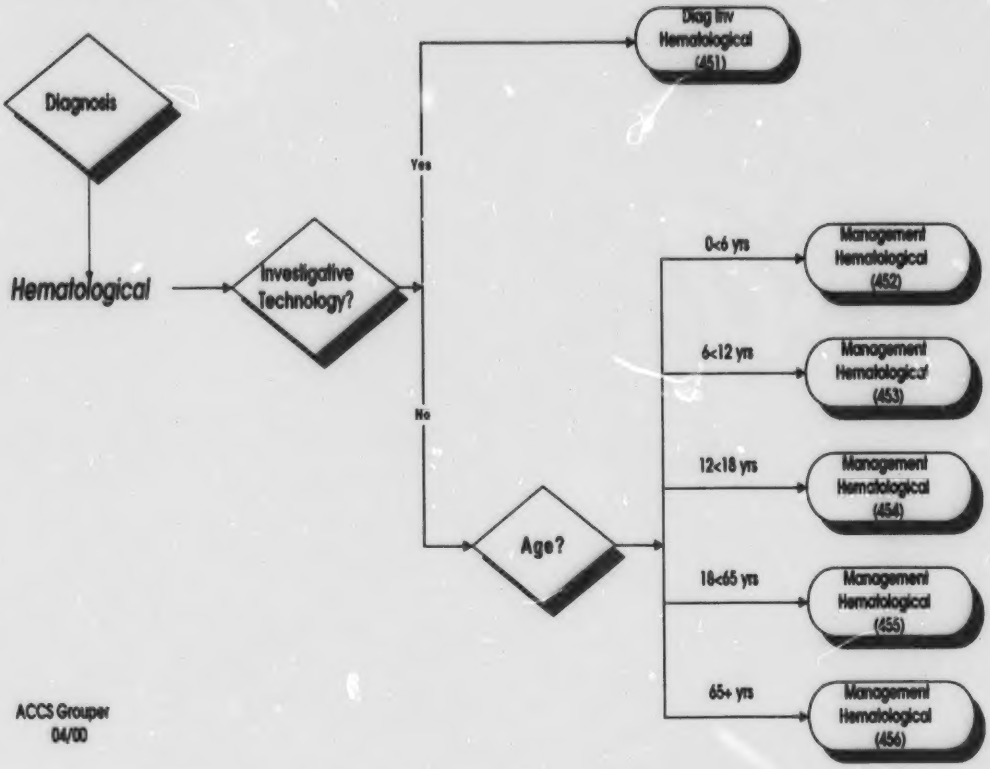
ACCS CELL
413 GI Bleed/Perforation/Obstruction

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
413 GI BLEED/PERFORATION/ OBSTRUCTION		
	01400	TB PERITONITIS - UNSPEC EXAM
	01401	TB PERITONITIS - NO EXAM
	01402	TB PERITONITIS - EXAM UNKNOWN
	01403	TB PERITONITIS - MICRO DX
	01404	TB PERITONITIS - CULTURE DX
	01405	TB PERITONITIS - HISTOLOGY DX
	01406	TB PERITONITIS - OTHER TEST
	0952	SYPHILITIC PERITONITIS
	09886	GONOCOCCAL PERITONITIS
	4560	ESOPHAGEAL VARICES W BLEEDING
	45620	ESOPH VARICES IN DIS EC W BLEED
	5304	PERFORATION OF ESOPHAGUS
	5307	GASTR0ESOPH LACN-HEMORRHAG SYND
	53082	ESOPHAGEAL HEMORRHAGE
	53100	ACUTE GASTRIC ULC W HEMORRHAGE
	53101	AC GASTRIC ULC W HEM/OBSTRUCT
	53110	ACUTE GASTRIC ULC W PERFORATION
	53111	AC GASTRIC ULC W PERF/OBSTRUCT
	53120	ACUTE GASTRIC ULCER W HEM/PERF
	53121	AC GAST ULC W HEM/PERF/OBSTRUCT
	53131	AC GAST ULC NO HEM/PERF W OBST
	53140	CHR/NOS GASTRIC ULC W HEMORRHAG
	53141	CHR/NOS GAST ULC W HEM/OBSTRUCT
	53150	CHR/NOS GASTRIC ULC W PERFORATN
	53151	CHR/NOS GASTRIC ULC W PERF/OBST
	53160	CHR/NOS GASTRIC ULC W HEM/PERF
	53161	CHR/NOS GAST ULC W HEM/PRF/OBST
	53171	CHR GAST ULC NO HEM/PERF W OBST
	53191	GAST ULC NOS NO HEM/PERF W OBST
	53200	AC DUODENAL ULCER W HEMORRHAGE
	53201	AC DUODENAL ULC W HEM/OBSTRUCT
	53210	AC DUODENAL ULCER W PERFORATION
	53211	AC DUODENAL ULC W PERF/OBSTRUCT
	53220	ACUTE DUODENAL ULCER W HEM/PERF
	53221	AC DUODENAL ULC W HEM/PERF/OBST
	53231	AC DUOD ULC NO HEM/PERF W OBST
	53240	CHR/NOS DUOD ULC W HEMORRHAGE
	53241	CHR/NOS DUODENAL ULC W HEM/OBST
	53250	CHR/NOS DUOD ULC W PERFORATION
	53251	CHR/NOS DUOD ULC W PERF/OBST
	53260	CHR/NOS DUODENAL ULC W HEM/PERF
	53261	CHR/NOS DUOD ULC W HEM/PRF/OBST
	53271	CHR DUOD ULC NO HEM/PERF W OBST
	53291	DUOD ULC NOS NO HEM/PERF W OBST
	53301	AC PEPTIC ULCER W HEM/OBSTRUCT
	53310	AC PEPTIC ULCER W PERFORATION
	53311	AC PEPTIC ULCER W PERF/OBSTRUCT
	53320	ACUTE PEPTIC ULCER W HEM/PERF
	53321	AC PEPTIC ULCER W HEM/PERF/OBST
	53330	ACUTE PEPTIC ULCER NO HEM/PERF
	53331	AC PEPT ULC NO HEM/PERF W OBST
	53340	CHR/NOS PEPTIC ULC W HEMORRHAGE

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
413 GI BLEED/PERFORATION/ OBSTRUCTION		
	53341	CHR/NOS PEPTIC ULCER W HEM/OBST
	53350	CHR/NOS PEPTIC ULCER WITH PERF
	53351	CHR/NOS PEPTIC ULC W PERF/OBST
	53360	CHR/NOS PEPTIC ULCER W HEM/PERF
	53361	CHR/NOS PEPT ULC W HEM/PRF/OBST
	53371	CHR PEPT ULC NO HEM/PERF W OBST
	53391	PEPT ULC NOS NO HEM/PERF W OBST
	53400	ACUTE GASTROJEJUNAL ULCER W HEM
	53401	AC GASTROJEJ ULC W HEM/OBSTRUCT
	53410	AC GASTROJEJUNAL ULCER W PERF
	53411	AC GASTROJEJ ULCER W PERF/OBST
	53420	AC GASTROJEJUNAL ULC W HEM/PERF
	53421	AC GASTROJEJ ULC W HEM/PRF/OBST
	53431	AC GASTJEJ ULC NO HEM/PERF OBST
	53440	CHR/NOS GASTROJEJ ULCER W HEM
	53441	CHR/NOS GASTJEJ ULC W HEM/OBST
	53450	CHR/NOS GASTROJEJ ULCER W PERF
	53451	CHR/NOS GASTJEJ ULC W PERF/OBST
	53460	CHR/NOS GASTROJEJ ULC HEM/PERF
	53461	CHR/NOS GASTJEJ ULC HEM/PRF/OBS
	53471	CHR/NOS GASTROJEJ ULCER W OBST
	53491	GASTROJEJUNAL ULCER NOS W OBST
	53501	ACUTE GASTRITIS WITH HEMORRHAGE
	53511	ATROPHIC GASTRITIS W HEMORRHAGE
	53521	GASTR MUC HYPERTR W HEMORRHAGE
	53531	ALCOHOLIC GASTRIT W HEMORRHAGE
	53541	OTH SPEC GASTRITIS W HEMORRHAGE
	53551	UNS GAST/GASTDUODENITIS W HEM
	53561	DUODENITIS WITH HEMORRHAGE
	5400	AC APPENDICITIS W GEN PERITONIT
	5401	AC APPENDICITIS W PERITON ABSC
	55200	FEM HERNIA W OBST UNILAT/NOS
	55201	FEM HERNIA W OBST UNILAT/RECUR
	55202	FEM HERNIA W OBST BILAT/NOS
	55203	FEM HERNIA W OBST BILAT/RECUR
	5521	UMBILICAL HERNIA W OBSTRUCTION
	55220	VENTRAL HERNIA NOS W OBSTRUCT
	55221	INCISIONAL HERNIA W OBSTRUCT
	55229	OTHER VENTRAL HERNIA W OBSTRUCT
	5523	DIAPHRAGMATIC HERNIA W OBSTRUCT
	5528	OTHER SPEC HERNIA W OBSTRUCTION
	5529	UNSPEC HERNIA WITH OBSTRUCTION
	5600	INTUSSUSCEPTION
	5601	PARALYTIC ILEUS
	5602	VOLVULUS
	56030	IMPACTION OF INTESTINE UNSPEC
	56031	GALLSTONE ILEUS
	56039	OTHER IMPACTION OF INTESTINE
	56081	INTEST/PERITON ADHESIONS W OBST
	56089	OTH SPEC INTESTINAL OBSTRUCTION
	5609	UNSPEC INTESTINAL OBSTRUCTION
	5670	PERITONITIS IN INFECT DIS EC
	5671	PNEUMOCOCCAL PERITONITIS
	5672	OTHER SUPPURATIVE PERITONITIS
	5678	OTHER SPECIFIED PERITONITIS
	5679	UNSPECIFIED PERITONITIS
	5693	HEMORRHAGE OF RECTUM AND ANUS

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
413 GI BLEED/PERFORATION/ OBSTRUCTION		
	56983	PERFORATION OF INTESTINE
	5780	HEMATEMESIS
	5789	HEMORRHAGE OF GI TRACT UNSPEC

Hematological
Clinical Grouping


Diagnosis
Hematological
Investigative Technology?
Yes
Diag Inv Hematological (451)
No
Age?
0<6 yrs
Management Hematological (452)
6<12 yrs
Management Hematological (453)
12<18 yrs
Management Hematological (454)
18<65 yrs
Management Hematological (455)
65+ yrs
Management Hematological (456)

ACCS Grouper
04/00

ACCS CELL
451-456 Hematological

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
451-456 DIAG INV & MANAGEMENT HEMATOLOGICAL		
	01720	TB PERIPH LYMPH - UNSPEC EXAM
	01721	TB PERIPH LYMPH - NO EXAM
	01722	TB PERIPH LYMPH - EXAM UNKNOWN
	01723	TB PERIPH LYMPH - MICRO DX
	01724	TB PERIPH LYMPH - CULTURE DX
	01725	TB PERIPH LYMPH - HISTOLOGY DX
	01726	TB PERIPH LYMPH - OTHER TEST
	01770	TB OF SPLEEN - UNSPEC EXAM
	01771	TB OF SPLEEN - NO EXAM
	01772	TB OF SPLEEN - EXAM UNKNOWN
	01773	TB OF SPLEEN - MICRO DX
	01774	TB OF SPLEEN - CULTURE DX
	01775	TB OF SPLEEN - HISTOLOGY DX
	01776	TB OF SPLEEN - OTHER TEST
	1960	SECOND MAL LYMPH HEAD/FACE/NECK
	1961	SECOND MAL INTRATHORACIC LYMPH
	1962	SECOND MAL INTRAABDOMINAL LYMPH
	1963	SECOND MAL AXIL/UPP LIMB LYMPH
	1965	SECOND MAL ING/LOW LIMB LYMPH
	1966	SECOND MAL INTRAPELVIC LYMPH
	1968	SECOND MAL NEO LYMPH MULT SITES
	1969	SECOND MAL NEO LYMPH SITE NOS
	20000	RETICULOSARCOMA UNSPEC SITE
	20001	RETICULOSARCOMA HEAD/FACE/NECK
	20002	RETICULOSARCOMA INTRATHORACIC
	20003	RETICULOSARCOMA INTRAABDOMINAL
	20004	RETICULOSARCOMA AXILLA/UPP LIMB
	20005	RETICULOSARCOMA ING/LOWER LIMB
	20006	RETICULOSARCOMA INTRAPELVIC
	20007	RETICULOSARCOMA SPLEEN
	20008	RETICULOSARCOMA MULTIPLE SITES
	20010	LYMPHOSARCOMA UNSPECIFIED SITE
	20011	LYMPHOSARCOMA HEAD/FACE/NECK
	20012	LYMPHOSARCOMA INTRATHORACIC
	20013	LYMPHOSARCOMA INTRAABDOMINAL
	20014	LYMPHOSARCOMA AXILLA/UPPER LIMB
	20015	LYMPHOSARCOMA INGUINAL/LOW LIMB
	20016	LYMPHOSARCOMA INTRAPELVIC
	20017	LYMPHOSARCOMA SPLEEN
	20018	LYMPHOSARCOMA MULTIPLE SITES
	20020	BURKITT'S TUMOR UNSPEC SITE
	20021	BURKITT'S TUMOR HEAD/FACE/NECK
	20022	BURKITT'S TUMOR INTRATHORACIC
	20023	BURKITT'S TUMOR INTRAABDOMINAL
	20024	BURKITT'S TUMOR AXILLA/UPP LIMB
	20025	BURKITT'S TUMOR ING/LOWER LIMB
	20026	BURKITT'S TUMOR INTRAPELVIC
	20027	BURKITT'S TUMOR SPLEEN
	20028	BURKITT'S TUMOR MULTIPLE SITES
	20080	OTH LYMPHO/RETICULO UNSPEC SITE
	20081	OTH LYMPHO/RETICULO HD/FAC/NECK
	20082	OTH LYMPHO/RETICULO INTRATHOR

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
451-456 DIAG INV & MANAGEMENT HEMATOLOGICAL		
	20083	OTH LYMPHO/RETICULO INTRAABD
	20084	OTH LYMPHO/RETICULO AXILLA/ARM
	20085	OTH LYMPHO/RETICULO ING/LEG
	20086	OTH LYMPHO/RETICULO INTRAPELVIC
	20087	OTH LYMPHO/RETICULO SPLEEN
	20088	OTH LYMPHO/RETICULO MULT SITES
	20100	HODGKIN'S PARAGRAN UNSPEC SITE
	20101	HODGKIN'S PARAGRAN HD/FACE/NECK
	20102	HODGKIN'S PARAGRAN INTRATHOR
	20103	HODGKIN'S PARAGRAN INTRAABD
	20104	HODGKIN'S PARAGRAN AXILLA/ARM
	20105	HODGKIN'S PARAGRAN ING/LEG
	20106	HODGKIN'S PARAGRAN INTRAPELVIC
	20107	HODGKIN'S PARAGRAN SPLEEN
	20108	HODGKIN'S PARAGRAN MULT SITES
	20110	HODGKIN'S GRAN UNSPEC SITE
	20111	HODGKIN'S GRAN HEAD/FACE/NECK
	20112	HODGKIN'S GRAN INTRATHORACIC
	20113	HODGKIN'S GRAN INTRAABDOMINAL
	20114	HODGKIN'S GRAN AXILLA/UPP LIMB
	20115	HODGKIN'S GRAN ING/LOWER LIMB
	20116	HODGKIN'S GRAN INTRAPELVIC
	20117	HODGKIN'S GRAN SPLEEN
	20118	HODGKIN'S GRAN MULTIPLE SITES
	20120	HODGKIN'S SARCOMA UNSPEC SITE
	20121	HODGKIN'S SARCOMA HD/FACE/NECK
	20122	HODGKIN'S SARCOMA INTRATHORACIC
	20123	HODGKIN'S SARCOMA INTRAABD
	20124	HODGKIN'S SARCOMA AXIL/UPP LIMB
	20125	HODGKIN'S SARCOMA ING/LOW LIMB
	20126	HODGKIN'S SARCOMA INTRAPELVIC
	20127	HODGKIN'S SARCOMA SPLEEN
	20128	HODGKIN'S SARCOMA MULT SITES
	20140	HODG LYMPHO/HISTIO UNSPEC SITE
	20141	HODG LYMPHO/HISTIO HD/FACE/NECK
	20142	HODG LYMPHO/HISTIO INTRATHOR
	20143	HODG LYMPHO/HISTIO INTRAABD
	20144	HODG LYMPHO/HISTIO AXILLA/ARM
	20145	HODG LYMPHO/HISTIO ING/LOW LIMB
	20146	HODG LYMPHO/HISTIO INTRAPELVIC
	20147	HODG LYMPHO/HISTIO SPLEEN
	20148	HODG LYMPHO/HISTIO MULT SITES
	20150	HODG NODUL SCLEROS UNSPEC SITE
	20151	HODG NODUL SCLEROS HD/FACE/NECK
	20152	HODG NODUL SCLEROS INTRATHOR
	20153	HODG NODUL SCLEROS INTRAABD
	20154	HODG NODUL SCLEROS AXILLA/ARM
	20155	HODG NODUL SCLEROS ING/LOW LIMB
	20156	HODG NODUL SCLEROS INTRAPELVIC
	20157	HODG NODUL SCLEROS SPLEEN
	20158	HODG NODUL SCLEROS MULT SITES
	20160	HODGKIN'S MIX CELL UNSPEC SITE
	20161	HODGKIN'S MIX CELL HD/FACE/NECK
	20162	HODGKIN'S MIX CELL INTRATHOR
	20163	HODGKIN'S MIX CELL INTRAABD
	20164	HODGKIN'S MIX CELL AXILLA/ARM

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
461-466 DIAG INV & MANAGEMENT HEMATOLOGICAL		
	20165	HODGKIN'S MIX CELL ING/LOW LIMB
	20166	HODGKIN'S MIX CELL INTRAPELVIC
	20167	HODGKIN'S MIX CELL SPLEEN
	20168	HODGKIN'S MIX CELL MULT SITES
	20170	HODG LYMPH DEPL UNSPEC SITE
	20171	HODG LYMPH DEPL HEAD/FACE/NECK
	20172	HODG LYMPH DEPL INTRATHORACIC
	20173	HODG LYMPH DEPL INTRAABDOMINAL
	20174	HODG LYMPH DEPL AXILLA/UPP LIMB
	20175	HODG LYMPH DEPL ING/LOWER LIMB
	20176	HODG LYMPH DEPL INTRAPELVIC
	20177	HODG LYMPH DEPL SPLEEN
	20178	HODG LYMPH DEPL MULT SITES
	20190	UNSPEC HODGKIN'S UNSPEC SITE
	20191	UNSPEC HODGKIN'S HEAD/FACE/NECK
	20192	UNSPEC HODGKIN'S INTRATHORACIC
	20193	UNSPEC HODGKIN'S INTRAABDOMINAL
	20194	UNSPEC HODGKIN'S AXIL/UPP LIMB
	20195	UNSPEC HODGKIN'S ING/LOWER LIMB
	20196	UNSPEC HODGKIN'S INTRAPELVIC
	20197	UNSPEC HODGKIN'S SPLEEN
	20198	UNSPEC HODGKIN'S MULTIPLE SITES
	20200	NODULAR LYMPHOMA UNSPEC SITE
	20201	NODULAR LYMPHOMA HEAD/FACE/NECK
	20202	NODULAR LYMPHOMA INTRATHORACIC
	20203	NODULAR LYMPHOMA INTRAABDOMINAL
	20204	NODULAR LYMPHOMA AXIL/UPP LIMB
	20205	NODULAR LYMPHOMA ING/LOWER LIMB
	20206	NODULAR LYMPHOMA INTRAPELVIC
	20207	NODULAR LYMPHOMA SPLEEN
	20208	NODULAR LYMPHOMA MULTIPLE SITES
	20210	MYCOSIS FUNGOIDES UNSPEC SITE
	20211	MYCOSIS FUNGOIDES HD/FACE/NECK
	20212	MYCOSIS FUNGOIDES INTRATHORACIC
	20213	MYCOSIS FUNGOIDES INTRAABD
	20214	MYCOSIS FUNGOIDES AXIL/UPP LIMB
	20215	MYCOSIS FUNGOIDES ING/LOW LIMB
	20216	MYCOSIS FUNGOIDES INTRAPELVIC
	20217	MYCOSIS FUNGOIDES SPLEEN
	20218	MYCOSIS FUNGOIDES MULT SITES
	20220	SEZARY'S DISEASE UNSPEC SITE
	20221	SEZARY'S DISEASE HEAD/FACE/NECK
	20222	SEZARY'S DISEASE INTRATHORACIC
	20223	SEZARY'S DISEASE INTRAABDOMINAL
	20224	SEZARY'S DISEASE AXIL/UPP LIMB
	20225	SEZARY'S DISEASE ING/LOWER LIMB
	20226	SEZARY'S DISEASE INTRAPELVIC
	20227	SEZARY'S DISEASE SPLEEN
	20228	SEZARY'S DISEASE MULTIPLE SITES
	20230	MAL HISTIOCYTOSIS UNSPEC SITE
	20231	MAL HISTIOCYTOSIS HD/FACE/NECK
	20232	MAL HISTIOCYTOSIS INTRATHORACIC
	20233	MAL HISTIOCYTOSIS INTRAABD
	20234	MAL HISTIOCYTOSIS AXIL/UPP LIMB
	20235	MAL HISTIOCYTOSIS ING/LOW LIMB
	20236	MAL HISTIOCYTOSIS INTRAPELVIC

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
451-456 DIAG INV & MANAGEMENT HEMATOLOGICAL		
	20237	MAL HISTIOCYTOSIS SPLEEN
	20238	MAL HISTIOCYTOSIS MULT SITES
	20240	LEUKEMIC RETICULO UNSPEC SITE
	20241	LEUKEMIC RETICULO HD/FACE/NECK
	20242	LEUKEMIC RETICULO INTRATHORACIC
	20243	LEUKEMIC RETICULO INTRAABD
	20244	LEUKEMIC RETICULO AXIL/UPP LIMB
	20245	LEUKEMIC RETICULO ING/LOW LIMB
	20246	LEUKEMIC RETICULO INTRAPELVIC
	20247	LEUKEMIC RETICULO SPLEEN
	20248	LEUKEMIC RETICULO MULT SITES
	20250	LETTERER-SIWE DIS UNSPEC SITE
	20251	LETTERER-SIWE DIS HD/FACE/NECK
	20252	LETTERER-SIWE DIS INTRATHORACIC
	20253	LETTERER-SIWE DIS INTRAABD
	20254	LETTERER-SIWE DIS AXIL/UPP LIMB
	20255	LETTERER-SIWE DIS ING/LOW LIMB
	20256	LETTERER-SIWE DIS INTRAPELVIC
	20257	LETTERER-SIWE DIS SPLEEN
	20258	LETTERER-SIWE DIS MULT SITES
	20260	MAST-CELL TUMORS UNSPEC SITE
	20261	MAST-CELL TUMORS HEAD/FACE/NECK
	20262	MAST-CELL TUMORS INTRATHORACIC
	20263	MAST-CELL TUMORS INTRAABDOMINAL
	20264	MAST-CELL TUMORS AXIL/UPP LIMB
	20265	MAST-CELL TUMORS ING/LOWER LIMB
	20266	MAST-CELL TUMORS INTRAPELVIC
	20267	MAST-CELL TUMORS SPLEEN
	20268	MAST-CELL TUMORS MULTIPLE SITES
	20280	OTHER LYMPHOMAS UNSPEC SITE
	20281	OTHER LYMPHOMAS HEAD/FACE/NECK
	20282	OTHER LYMPHOMAS INTRATHORACIC
	20283	OTHER LYMPHOMAS INTRAABDOMINAL
	20284	OTHER LYMPHOMAS AXILLA/UPP LIMB
	20285	OTHER LYMPHOMAS ING/LOWER LIMB
	20286	OTHER LYMPHOMAS INTRAPELVIC
	20287	OTHER LYMPHOMAS SPLEEN
	20288	OTHER LYMPHOMAS MULTIPLE SITES
	20290	MAL LYMPHOID NOS UNSPEC SITE
	20291	MAL LYMPHOID NOS HEAD/FACE/NECK
	20292	MAL LYMPHOID NOS INTRATHORACIC
	20293	MAL LYMPHOID NOS INTRAABDOMINAL
	20294	MAL LYMPHOID NOS AXIL/UPP LIMB
	20295	MAL LYMPHOID NOS ING/LOWER LIMB
	20296	MAL LYMPHOID NOS INTRAPELVIC
	20297	MAL LYMPHOID NOS SPLEEN
	20298	MAL LYMPHOID NOS MULTIPLE SITES
	20300	MULTIPLE MYELOMA NO REMISSION
	20301	MULTIPLE MYELOMA IN REMISSION
	20310	PLASMA CELL LEUK NO REMISSION
	20311	PLASMA CELL LEUK IN REMISSION
	20380	OTH IMMUNOPRO NEO NO REMISSION
	20381	OTH IMMUNOPROL NEO IN REMISSION
	20400	AC LYMPHOID LEUK NO REMISSION
	20401	ACUTE LYMPH LEUK IN REMISSION
	20410	CHR LYMPHOID LEUK NO REMISSION

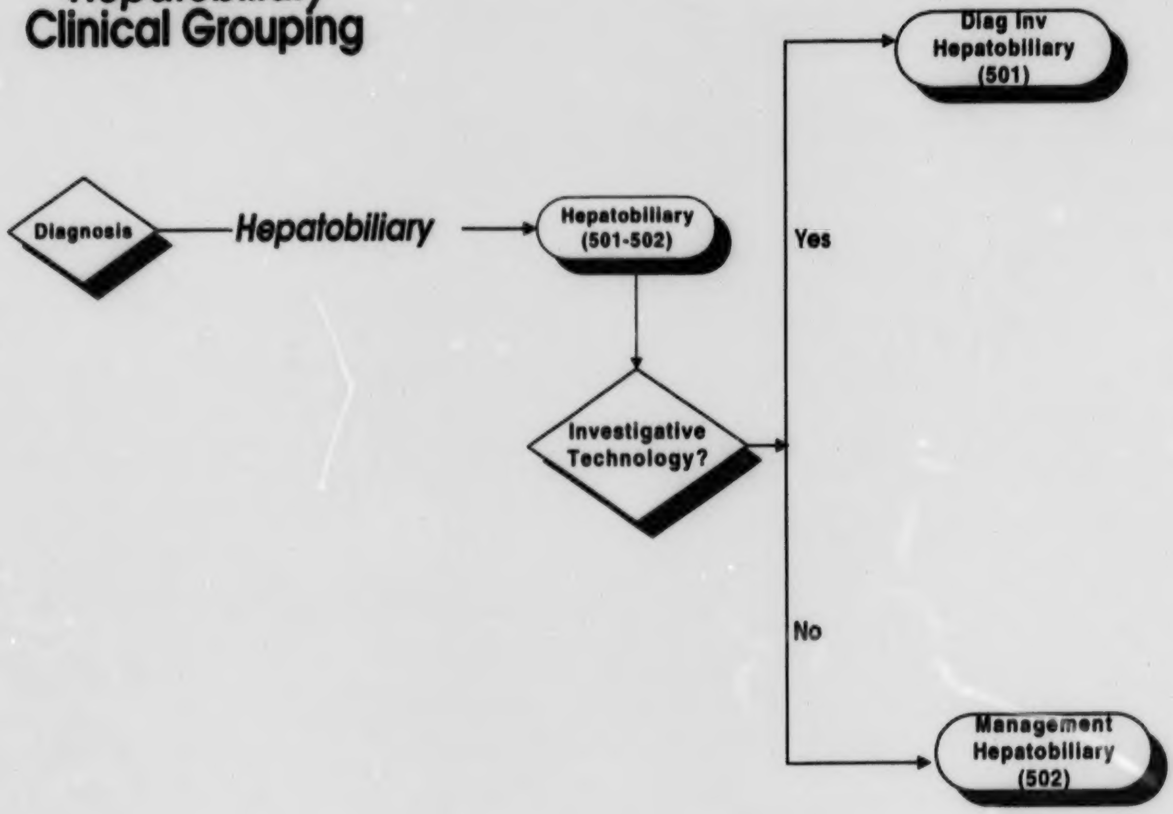
ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
451-458 DIAG INV & MANAGEMENT HEMATOLOGICAL		
	20411	CHR LYMPHOID LEUK IN REMISSION
	20420	SUBACUTE LYMPHOID LEUK NO REMIS
	20421	SUBACUTE LYMPHOID LEUK IN REMIS
	20480	OTH LYMPHOID LEUK NO REMISSION
	20481	OTH LYMPHOID LEUK IN REMISSION
	20490	UNS LYMPHOID LEUK NO REMISSION
	20491	UNS LYMPHOID LEUK IN REMISSION
	20500	ACUTE MYELOID LEUK NO REMISSION
	20501	ACUTE MYELOID LEUK IN REMISSION
	20510	CHR MYELOID LEUK NO REMISSION
	20511	CHR MYELOID LEUK IN REMISSION
	20520	SUBACUTE MYEL LEUK NO REMISSION
	20521	SUBACUTE MYEL LEUK IN REMISSION
	20530	MYELOID SARCOMA NO REMISSION
	20531	MYELOID SARCOMA IN REMISSION
	20580	OTH MYELOID LEUK NO REMISSION
	20581	OTH MYELOID LEUK IN REMISSION
	20590	UNSP MYELOID LEUK NO REMISSION
	20591	UNSP MYELOID LEUK IN REMISSION
	20600	AC MONOCYTIC LEUK NO REMISSION
	20601	AC MONOCYTIC LEUK IN REMISSION
	20610	CHR MONOCYTIC LEUK NO REMISSION
	20611	CHR MONOCYTIC LEUK IN REMISSION
	20620	SUBAC MONOCYT LEUK NO REMISSION
	20621	SUBAC MONOCYT LEUK IN REMISSION
	20680	OTH MONOCYTIC LEUK NO REMISSION
	20681	OTH MONOCYTIC LEUK IN REMISSION
	20690	UNSP MONOCYT LEUK NO REMISSION
	20691	UNSP MONOCYT LEUK IN REMISSION
	20700	AC ERYTH:EMIA/LEUK NO REMISSION
	20701	AC ERYTH:EMIA/LEUK IN REMISSION
	20710	CHR ERYTHREMIA NO REMISSION
	20711	CHRONIC ERYTHREMIA IN REMISSION
	20720	MEGAKARYOCYT LEUK NO REMISSION
	20721	MEGAKARYOCYT LEUK IN REMISSION
	20780	OTH SPECIFIED LEUK NO REMISSION
	20781	OTH SPECIFIED LEUK IN REMISSION
	20800	AC LEUK UNSP CELL NO REMISSION
	20801	AC LEUK UNSP CELL IN REMISSION
	20810	CHR LEUK UNSP CELL NO REMISSION
	20811	CHR LEUK UNSP CELL IN REMISSION
	20820	SUBAC LEUK UNSP CELL NO REMISS
	20821	SUBAC LEUK UNSP CELL IN REMISS
	20880	OTH LEUK UNSP CELL NO REMISSION
	20881	OTH LEUK UNSP CELL IN REMISSION
	20890	UNSPEC LEUKEMIA NO REMISSION
	20891	UNSPEC LEUKEMIA IN REMISSION
	2126	BENIGN NEOPLASM OF THYMUS
	2281	LYMPHANGIOMA ANY SITE
	2290	BENIGN NEOPLASM OF LYMPH NODES
	2384	POLYCYTHEMIA VERA
	2385	NEO UNCERT BEHAV HISTIO/MAST
	2386	NEO UNCERT BEHAV PLASMA CELLS
	2387	NEO UNCERT BEHAV OTH LYMPH TISS
	2540	PERSISTENT HYPERPLASIA THYMUS
	2541	ABSCESS OF THYMUS

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
451-456 DIAG INV & MANAGEMENT HEMATOLOGICAL		
	2548	OTH SPEC DISEASES THYMUS GLAND
	2549	UNSPEC DISEASE OF THYMUS GLAND
	2730	POLYCLON HYPERGAMMAGLOBULINEMIA
	2731	MONOCLONAL PARAPROTEINEMIA
	2732	OTHER PARAPROTEINEMIAS
	2733	MACROGLOBULINEMIA
	2738	OTH DISORDER PLASMA PROTEIN MET
	2739	DISORDER PLASMA PROTEIN MET NOS
	2773	AMYLOIDOSIS
	27900	HYPOGAMMAGLOBULINEMIA UNSPEC
	27901	SELECTIVE IGA IMMUNODEFICIENCY
	27902	SELECTIVE IGM IMMUNODEFICIENCY
	27903	OTH SELECT IMMUNOGLOBULIN DEFIC
	27904	CONGEN HYPOGAMMAGLOBULINEMIA
	27905	IMMUNODEFICIENCY W INCREASE IGM
	27906	COM VARIABLE IMMUNODEFICIENCY
	27909	OTH DEFICIENCY HUMORAL IMMUNITY
	27910	IMMUNODEFIC PREDOM TCELL DEFECT
	27911	DIGEORGE'S SYNDROME
	27912	WISKOTT-ALDRICH SYNDROME
	27913	NEZELOF'S SYNDROME
	27919	OTH CELL-MEDIATED IMMUNE DEFIC
	2792	COMBINED IMMUNITY DEFICIENCY
	2793	UNSPECIFIED IMMUNITY DEFICIENCY
	2798	OTH DISORDERS IMMUNE MECHANISM
	2799	UNSPEC DISORD IMMUNE MECHANISM
	2800	IRON DEFIC ANEM D/T BLOOD LOSS
	2801	IRON DEFIC ANEM LOW DIET IRON
	2808	OTH SPEC IRON DEFICIENCY ANEMIA
	2809	IRON DEFICIENCY ANEMIA UNSPEC
	2810	PERNICIOUS ANEMIA
	2811	OTHER VITAMIN-B12-DEFIC ANEMIA
	2812	FOLATE-DEFICIENCY ANEMIA
	2813	OTH SPEC MEGALOBLAST ANEMIA NEC
	2814	PROTEIN-DEFICIENCY ANEMIA
	2818	ANEMIA W OTH SPEC NUTRIT DEFIC
	2819	UNSPECIFIED DEFICIENCY ANEMIA
	2820	HEREDITARY SPHEROCYTOSIS
	2821	HEREDITARY ELLIPTOCYTOSIS
	2822	ANEM D/T DISORD GLUTATHIONE MET
	2823	OTH HEMOLYT ANEMIA ENZYME DEFIC
	2824	THALASSEMIAS
	2825	SICKLE-CELL TRAIT
	28260	SICKLE-CELL ANEMIA UNSPEC
	28261	HB-S DISEASE WITHOUT CRISIS
	28262	HB-S DISEASE WITH CRISIS
	28263	SICKLE-CELL/HB-C DISEASE
	28269	OTHER SICKLE-CELL ANEMIA
	2827	OTHER HEMOGLOBINOPATHIES
	2828	OTH HEREDITARY HEMOLYTIC ANEMIA
	2829	HEREDITARY HEMOLYTIC ANEMIA NOS
	2830	AUTOIMMUNE HEMOLYTIC ANEMIAS
	28310	UNS NON-AUTOIMMUNE HEMOLYT ANEM
	28319	OTH NON-AUTOIMMUNE HEMOLYT ANEM
	2832	HEMOGLOBINURIA HEMOLYS EXT CAUS
	2839	UNSPEC ACQUIRED HEMOLYT ANEMIA

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
451-456 DIAG INV & MANAGEMENT HEMATOLOGICAL		
	2840	CONSTITUTIONAL APLASTIC ANEMIA
	2848	OTH SPECIFIED APLASTIC ANEMIAS
	2849	UNSPECIFIED APLASTIC ANEMIA
	2850	SIDEROBLASTIC ANEMIA
	2851	ACUTE POSTHEMORRHAGIC ANEMIA
	2858	OTHER SPECIFIED ANEMIAS
	2859	ANEMIA UNSPECIFIED
	2860	CONGENITAL FACTOR VIII DISORDER
	2861	CONGENITAL FACTOR IX DISORDER
	2862	CONGENITAL FACTOR XI DEFICIENCY
	2863	CONGEN DEFIC OTH CLOTTING FACT
	2864	VON WILLEBRAND'S DISEASE
	2865	HEMORRHAG DISORD CIRC ANTICOAG
	2866	DEFIBRINATION SYNDROME
	2867	ACQUIRED COAGULATION FACT DEFIC
	2869	OTH/UNSPEC COAGULATION DEFECTS
	2870	ALLERGIC PURPURA
	2871	QUALITATIVE PLATELET DEFECTS
	2872	OTH NONTHROMBOCYTOPENIC PURPURA
	2873	PRIMARY THROMBOCYTOPENIA
	2874	SECONDARY THROMBOCYTOPENIA
	2875	THROMBOCYTOPENIA UNSPECIFIED
	2878	OTH SPEC HEMORRHAGIC CONDITIONS
	2879	UNSPEC HEMORRHAGIC CONDITIONS
	2880	AGRANULOCYTOSIS
	2881	FUNCT DISORD NEUTROPHIL POLYMOR
	2882	GENETIC ANOMALIES OF LEUCOCYTES
	2883	EOSINOPHILIA
	2888	OTH SPEC DIS WHITE BLOOD CELLS
	2889	UNSPEC DIS WHITE BLOOD CELLS
	2890	SECONDARY POLYCYTHEMIA
	2891	CHRONIC LYMPHADENITIS
	2893	LYMPHADENITIS UNSPEC EXCEPT MES
	2894	HYPERSPLENISM
	28950	DISEASE OF SPLEEN UNSPECIFIED
	28951	CHRONIC CONGESTIVE SPLENOMEGALY
	28959	OTHER DISEASES OF SPLEEN
	2896	FAMILIAL POLYCYTHEMIA
	2897	METHEMOGLOBINEMIA
	2898	OTH DIS BLOOD/BLOOD-FORMING ORG
	2899	UNSPEC DIS BLOOD/-FORMING ORGAN
	4460	POLYARTERITIS NODOSA
	4461	AC FEBRILE MUCOCUTAN LYMPH SYND
	44620	HYPERSENSITIVITY ANGIITIS NOS
	44621	GOODPASTURE'S SYNDROME
	44629	OTH SPEC HYPERSENS ANGIITIS
	4463	LETHAL MIDLINE GRANULOMA
	4464	WEGENER'S GRANULOMATOSIS
	4466	THROMBOTIC MICROANGIOPATHY
	4467	TAKAYASU DISEASE
	4578	OTH NONINFECT DISORD LYMPH CHAN
	4579	NONINFECT DISORD LYMPH CHAN NOS
	7100	SYSTEMIC LUPUS ERYTHEMATOSUS
	7101	SYSTEMIC SCLEROSIS
	7102	SICCA SYNDROME
	7103	DERMATOMYOSITIS

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
451-456 DIAG INV & MANAGEMENT HEMATOLOGICAL		
	7104	POLYMYOSITIS
	7105	EOSINOPHILIA MYALGIA SYNDROME
	7590	ANOMALIES OF SPLEEN
	7892	SPLENOMEGALY
	7900	ABNORMALITY OF RED BLOOD CELLS
	99685	COMPL TRANSPLANTED BONE MARROW
	9996	ABO INCOMPATIBILITY REACTION
	9997	RH INCOMPATIBILITY REACTION
	9998	OTHER TRANSFUSION REACTION
	V4281	ORGAN OR TISSUE REPLACED BY TRANSPLANT BONE MARROW
	V4282	ORGAN OR TISSUE REPLACED BY TRANSPLANT PERIPHERAL STEM CELLS

Hepatobiliary Clinical Grouping


Diagnosis
Hepatobiliary
Hepatobiliary (501-502)
Investigative Technology?
Yes
Diag Inv Hepatobiliary (501)
No
Management Hepatobiliary (502)

ACCS Grouper
04/96

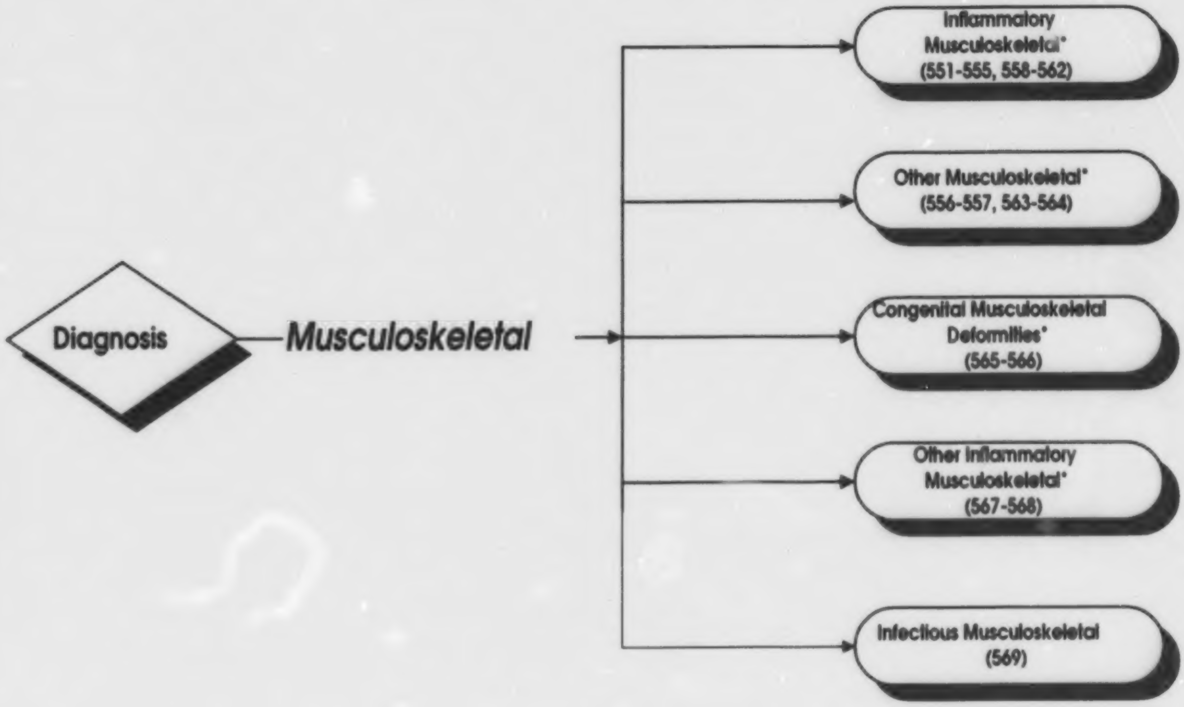
ACCS CELL
501-502 Hepatobiliary

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
501-502 DIAG INV & MANAGEMENT HEPATOBILIARY		
	0063	AMEBIC LIVER ABSCESS
	0700	VIR HEPATITIS A W HEPATIC COMA
	0701	VIR HEPATITIS A NO HEPATIC COMA
	07020	AC VIR HEPB W HEP COMA NO HEPDE
	07021	AC VIR HEPB W HEP COMA W HEP DE
	07022	CHR VIR HEPB W HEP COMA NO HEPD
	07023	CHR VIR HEPB W HEP COMA/HEP DEL
	07030	AC VIR HEPB NO HEP COMA/HEP DEL
	07031	AC VIR HEPB NO HEP COMA W HEPDE
	07032	CHR VIR HEPB NO HEP COMA/HEP DE
	07033	CHR VIR HEPB NO HEP COMA W HEPD
	07041	ACUTE HEP C WITH HEPATIC COMA
	07042	HEP DELTA NO ACTIVE HEPB W COMA
	07043	HEPATITIS E WITH HEPATIC COMA
	07044	CHR HEPATITIS C W HEPATIC COMA
	07049	OTH SPEC VIRAL HEP W HEP COMA
	07051	ACUTE HEP C NO HEPATIC COMA
	07052	HEP DEL NO ACTIVE HEPB NO COMA
	07053	HEPATITIS E NO HEPATIC COMA
	07054	CHR HEPATITIS C NO HEPATIC COMA
	07059	OTH SPEC VIR HEP NO HEP COMA
	0706	UNSPEC VIR HEPATITIS HEPAT COMA
	0709	UNSPEC VIR HEPATITIS NO COMA
	0723	MUMPS PANCREATITIS
	07271	MUMPS HEPATITIS
	09162	SECONDARY SYPHILITIC HEPATITIS
	0953	SYPHILIS OF LIVER
	1201	SCHISTOSOMA MANSONI
	1210	OPISTHORCHIASIS
	1211	CLONORCHIASIS
	1213	FASCIOLIASIS
	1214	FASCIOLOPSIASIS
	1220	ECHINOCOCCUS GRANULOSUS LIVER
	1225	ECHINOCOC MULTILOCULARIS LIVER
	1228	ECHINOCOCCOSIS UNSPEC OF LIVER
	1305	TOXOPLASMOSIS HEPATITIS
	2115	BEN NEO LIVER/BILIARY PASSAGES
	2116	BENIGN NEOPLASM OF PANCREAS
	2774	DISORDERS BILIRUBIN EXCRETION
	452	PORTAL VEIN THROMBOSIS
	4530	BUDD-CHIARI SYNDROME
	570	ACUTE/SUBACUTE NECROSIS LIVER
	5710	ALCOHOLIC FATTY LIVER
	5711	ACUTE ALCOHOLIC HEPATITIS
	5712	ALCOHOLIC CIRRHOSIS OF LIVER
	5713	ALCOHOLIC LIVER DAMAGE UNSPEC
	57140	CHRONIC HEPATITIS UNSPECIFIED
	57141	CHRONIC PERSISTENT HEPATITIS
	57149	OTHER CHRONIC HEPATITIS
	5715	CIRRHOSIS OF LIVER NO ALCOHOL
	5716	BILIARY CIRRHOSIS
	5718	OTH CHR NONALCOHOLIC LIVER DIS

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
501-502 DIAG INV & MANAGEMENT HEPATOBILARY		
	5719	UNSPEC CHR LIVER DIS NO ALCOHOL
	5720	ABSCESS OF LIVER
	5721	PORTAL PYEMIA
	5723	PORTAL HYPERTENSION
	5724	HEPATORENAL SYNDROME
	5728	OTH SEQUELAE CHR LIVER DISEASE
	5730	CHR PASSIVE CONGESTION OF LIVER
	5731	HEPATITIS IN VIRAL DISEASES EC
	5732	HEPATITIS IN OTH INFECT DIS EC
	5733	HEPATITIS UNSPECIFIED
	5734	HEPATIC INFARCTION
	5738	OTHER SPEC DISORDERS OF LIVER
	5739	UNSPECIFIED DISORDER OF LIVER
	57400	CALC W AC CHOLECYSTITIS NO OBST
	57401	CALC W AC CHOLECYSTITIS W OBST
	57410	CALC W OTHER CHOLECYST NO OBST
	57411	CALC W OTHER CHOLECYST W OBST
	57420	CALC NO CHOLECYSTITIS NO OBST
	57421	CALC NO CHOLECYSTITIS W OBST
	57430	CALC BIL W AC CHOLECYST NO OBST
	57431	CALC BIL W AC CHOLECYST W OBST
	57440	CALC BIL W OTH CHOLCYST NO OBST
	57441	CALC BIL W OTH CHOLECYST W OBST
	57450	CALC BILE DUCT NO CHOLCYST/OBST
	57451	CALC BIL NO CHOLECYST W OBST
	57460	CALC OF GALL B AND BILE D W AC CHOLE NO OBS
	57461	CALC OF GALL B AND BILE D W AC CHOLE W OBS
	57470	CALC OF GALL B AND BILE D W OTH CHOLE NO OBS
	57471	CALC OF GALL B AND BILE D W OTH CHOLE W OBS
	57480	CALC OF GALL B AND BILE D W AC&CH CHOLE NO OBS
	57481	CALC OF GALL B AND BILE D W AC&CH CHOLE W OBS
	57490	CALC OF GALL B AND BILE D NO CHOLE NO OBS
	57491	CALC OF GALL B AND BILE D NO CHOLE W OBS
	5750	ACUTE CHOLECYSTITIS
	57510	CHOLECYSTITIS UNSPEC
	57511	CHRONIC CHOLECYSTITIS
	57512	ACUTE & CHRONIC CHOLECYSTITIS
	5752	OBSTRUCTION OF GALLBLADDER
	5753	HYDROPS OF GALLBLADDER
	5754	PERFORATION OF GALLBLADDER
	5755	FISTULA OF GALLBLADDER
	5756	CHOLESTEROLOSIS OF GALLBLADDER
	5758	OTH SPEC DISORDERS GALLBLADDER
	5759	UNSPEC DISORDER OF GALLBLADDER
	5760	POSTCHOLECYSTECTOMY SYNDROME
	5761	CHOLANGITIS
	5762	OBSTRUCTION OF BILE DUCT
	5763	PERFORATION OF BILE DUCT
	5764	FISTULA OF BILE DUCT
	5765	SPASM OF SPHINCTER OF ODDI
	5768	OTH SPEC DISORD BILIARY TRACT
	5769	UNSPEC DISORDER BILIARY TRACT
	5770	ACUTE PANCREATITIS
	5771	CHRONIC PANCREATITIS
	5772	CYST/PSEUDOCYST OF PANCREAS
	5778	OTHER SPEC DISEASES OF PANCREAS

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
501-502 DIAG INV & MANAGEMENT HEPATOBILIARY		
	5779	UNSPECIFIED DISEASE OF PANCREAS
	75160	ANOM GALLBLAD/BILE DC/LIVER NOS
	75161	BILIARY ATRESIA
	75162	CONGENITAL CYSTIC DISEASE LIVER
	75169	OTH ANOM GALLBLAD/BILE DC/LIVER
	7517	ANOMALIES OF PANCREAS
	7824	JAUNDICE UNSPEC NOT NEWBORN
	7891	HEPATOMEGALY
	7895	ASCITES
	7933	ABNORMAL FINDINGS BILIARY TRACT
	7948	NONSPEC ABNORMAL LIVER FUNCTION
	99682	COMPLICATION TRANSPLANTED LIVER
	99686	COMPLICATN TRANSPLANT PANCREAS
	V427	LIVER REPLACED BY TRANSPLANT

Musculoskeletal Clinical Grouping


Diagnosis
Musculoskeletal
Inflammatory Musculoskeletal* (551-555, 558-562)
Other Musculoskeletal* (556-557, 563-564)
Congenital Musculoskeletal Deformities* (565-566)
Other Inflammatory Musculoskeletal* (567-568)
Infectious Musculoskeletal (569)

*Clinical Group broken down further - see following pages.

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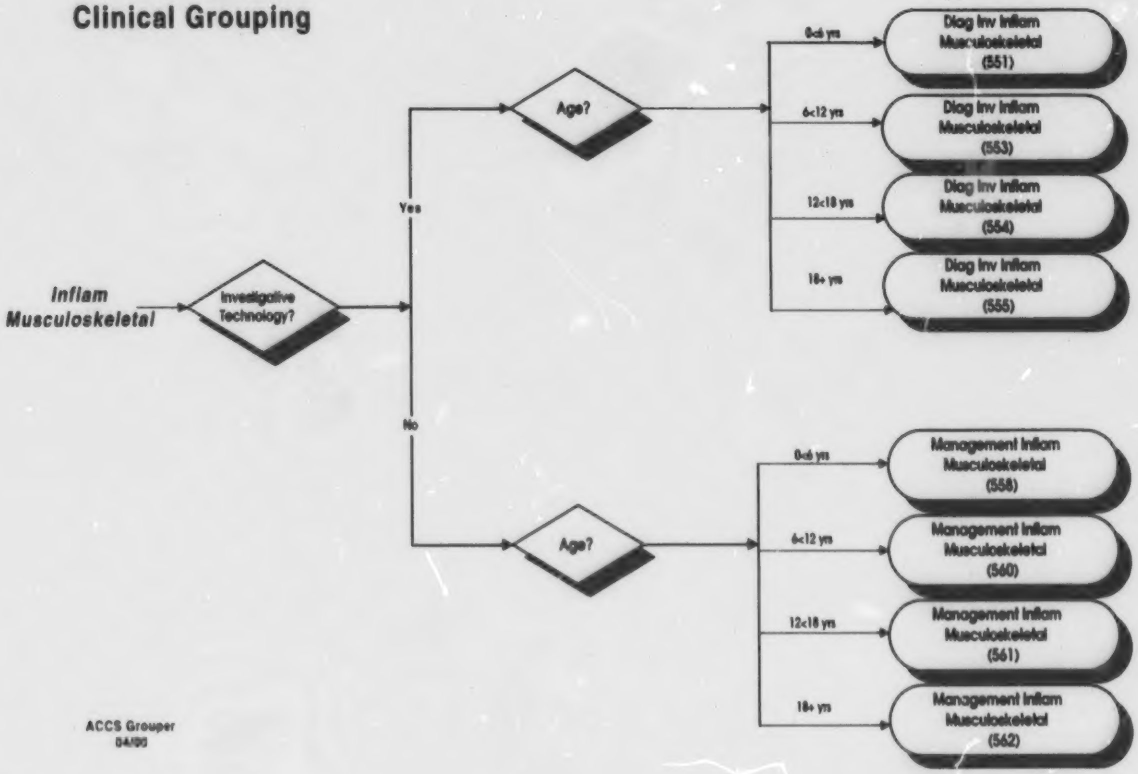
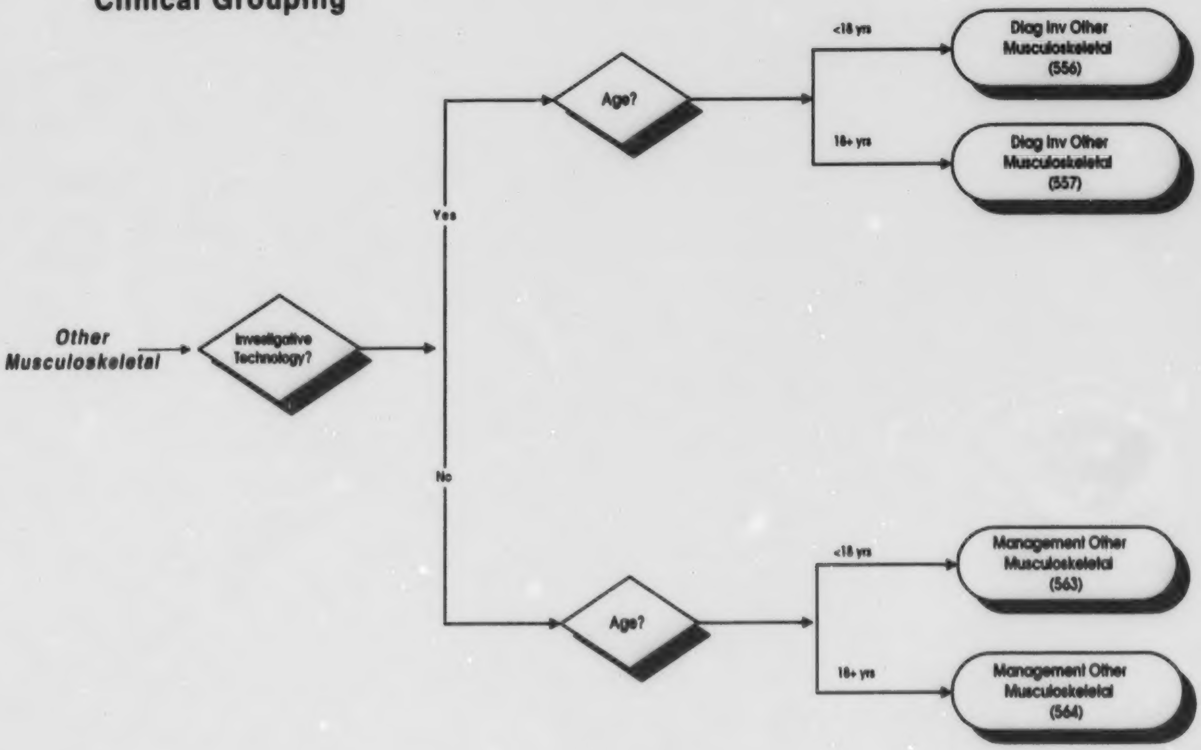
Musculoskeletal Clinical Grouping


Inflam Musculoskeletal
Investigative Technology?
Yes
No
Age?
0<6 yrs
Diag Inv Inflam Musculoskeletal (551)
6<12 yrs
Diag Inv Inflam Musculoskeletal (553)
12<18 yrs
Diag Inv Inflam Musculoskeletal (554)
18+ yrs
Diag Inv Inflam Musculoskeletal (555)
Age?
0<6 yrs
Management Inflam Musculoskeletal (558)
6<12 yrs
Management Inflam Musculoskeletal (560)
12<18 yrs
Management Inflam Musculoskeletal (561)
18+ yrs
Management Inflam Musculoskeletal (562)

ACCS Grouper
04/00

Musculoskeletal Clinical Grouping


Other Musculoskeletal
Investigative Technology?
Yes
Age?
<18 yrs
Diag Inv Other Musculoskeletal (556)
18+ yrs
Diag Inv Other Musculoskeletal (557)
No
Age?
<18 yrs
Management Other Musculoskeletal (563)
18+ yrs
Management Other Musculoskeletal (564)

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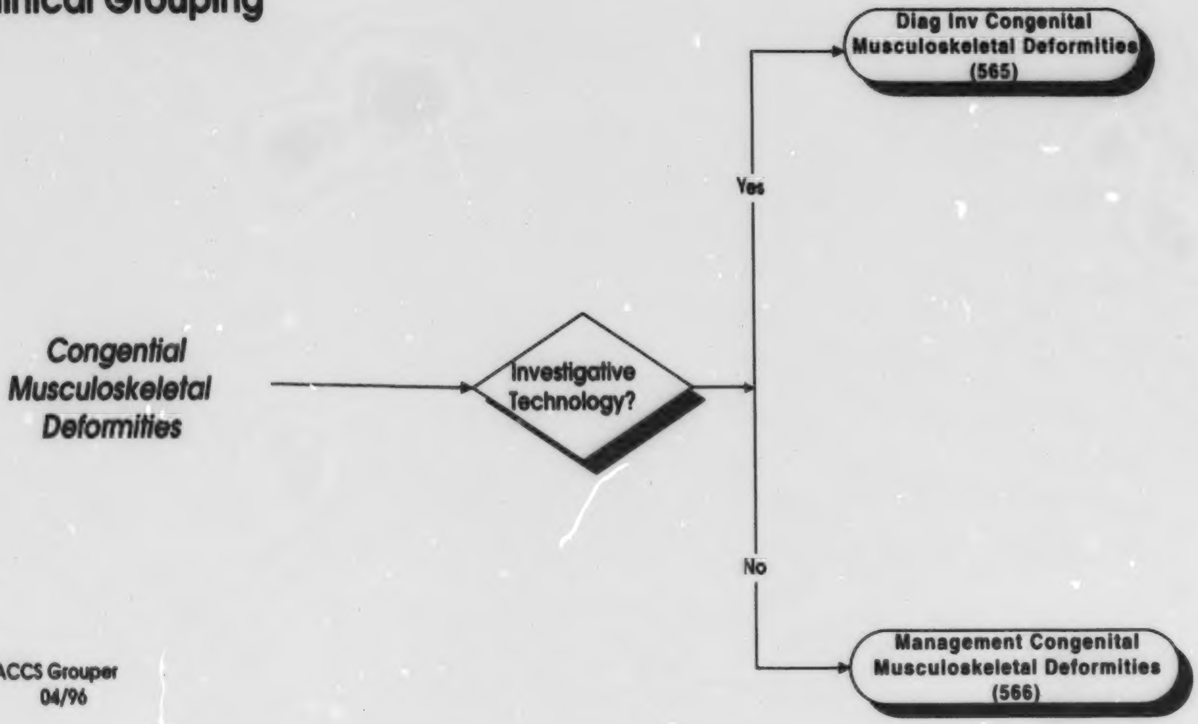
Musculoskeletal Clinical Grouping


Congential Musculoskeletal Deformities
Investigative Technology?
Yes
Diag Inv Congenital Musculoskeletal Deformities (565)
No
Management Congenital Musculoskeletal Deformities (566)

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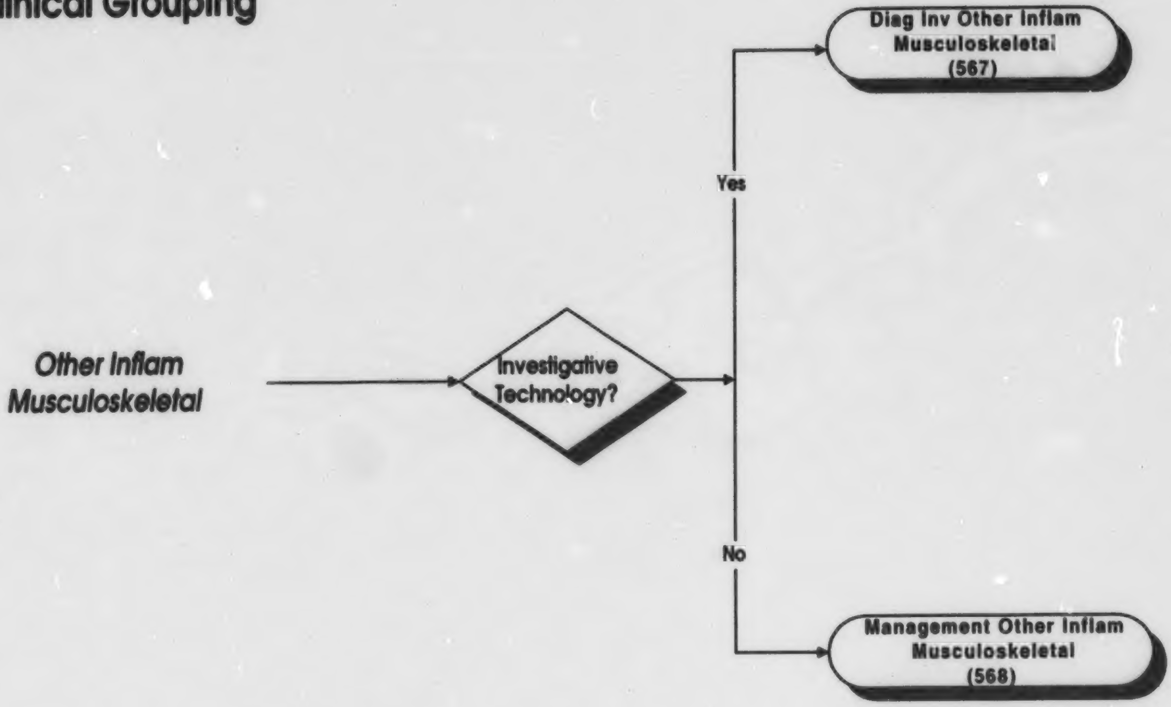
Musculoskeletal
Clinical Grouping


Other Inflam Musculoskeletal
Investigative Technology?
Yes
Diag Inv Other Inflam Musculoskeletal (567)
No
Management Other Inflam Musculoskeletal (568)

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04/96

ACCS CELL
551-555, 558-562 Inflam Musculoskeletal

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
551-555, 558-562 DIAG INV & MANAGEMENT INFLAM MUSCULOSKELETAL		
	2740	GOUTY ARTHROPATHY
	27481	GOUTY TOPHI OF EAR
	27482	GOUTY TOPHI OF OTHER SITES
	27489	GOUT WITH OTHER MANIFESTATIONS
	2749	UNSPECIFIED GOUT
	7108	OTH SPEC DIFF DIS CONNECT TISS
	7109	DIFFUSE DIS CONNECTIVE TISS NOS
	71120	ARTHRO BEHCET'S SYND SITE NOS
	71121	ARTHRO BEHCET'S SYND SHOULDER
	71122	ARTHRO BEHCET'S SYND UPPER ARM
	71123	ARTHRO BEHCET'S SYND FOREARM
	71124	ARTHRO BEHCET'S SYNDROME HAND
	71125	ARTHRO BEHCET'S SYND PELV/THIGH
	71126	ARTHRO BEHCET'S SYND LOWER LEG
	71127	ARTHRO BEHCET'S SYND ANKLE/FOOT
	71128	ARTHRO BEHCET'S SYND OTH SITES
	71129	ARTHRO BEHCET'S SYND MULT SITES
	71210	CHONDROCALC DICALC PHOS NOS
	71211	CHONDROCALC DICALC PHOS SHOULD
	71212	CHONDROCALC DICALC PHOS UPP ARM
	71213	CHONDROCALC DICALC PHOS FOREARM
	71214	CHONDROCALC DICALC PHOS HAND
	71215	CHONDROCALC DICALC PHOS PELVIS
	71216	CHONDROCALC DICALC PHOS LOW LEG
	71217	CHONDROCALC DICALC PHOS ANKL/FT
	71218	CHONDRCALC DICALC PHOS OTH SITE
	71219	CHONDCALC DICALC PHOS MULT SITE
	71220	CHONDROCALC PYROPHOS SITE NOS
	71221	CHONDROCALC PYROPHOS SHOULDER
	71222	CHONDROCALC PYROPHOS UPPER ARM
	71223	CHONDROCALC PYROPHOS FOREARM
	71224	CHONDROCALC PYROPHOSPHATE HAND
	71225	CHONDROCALC PYROPHOS PELV/THIGH
	71226	CHONDROCALC PYROPHOS LOWER LEG
	71227	CHONDROCALC PYROPHOS ANKLE/FOOT
	71228	CHONDROCALC PYROPHOS OTH SITES
	71229	CHONDROCALC PYROPHOS MULT SITES
	71230	CHONDROCALCINOSIS NOS SITE NOS
	71231	CHONDROCALCINOSIS NOS SHOULDER
	71232	CHONDROCALCINOSIS NOS UPPER ARM
	71233	CHONDROCALCINOSIS NOS FOREARM
	71234	CHONDROCALCINOSIS UNSPEC HAND
	71235	CHONDROCALCINOS NOS PELV/THIGH
	71236	CHONDROCALCINOSIS NOS LOWER LEG
	71237	CHONDROCALCINOS NOS ANKLE/FOOT
	71238	CHONDROCALCINOSIS NOS OTH SITES
	71239	CHONDROCALCINOSIS NOS MULT SITE
	71280	OTHER SPEC CRYS ARTHRO SITE NOS
	71281	OTHER SPEC CRYS ARTHRO SHOULDER
	71282	OTH SPEC CRYSTAL ARTHRO UPP ARM
	71283	OTH SPEC CRYSTAL ARTHRO FOREARM
	71284	OTHER SPEC CRYSTAL ARTHRO HAND
	71285	OTH SPEC CRYS ARTHRO PELV/THIGH

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
551-555, 558-562 DIAG INV & MANAGEMENT INFLAM MUSCULOSKELETAL		
	71286	OTH SPEC CRYSTAL ARTHRO LOW LEG
	71287	OTH SPEC CRYSTAL ARTHRO ANKL/FT
	71288	OTH SPEC CRYS ARTHRO OTH SITES
	71289	OTH SPEC CRYS ARTHRO MULT SITES
	71290	CRYS ARTHROPATHY NOS SITE NOS
	71291	CRYSTAL ARTHROPATHY NOS SHOULD
	71292	CRYSTAL ARTHROPATHY NOS UPP ARM
	71293	CRYSTAL ARTHROPATHY NOS FOREARM
	71294	CRYSTAL ARTHROPATHY NOS HAND
	71295	CRYS ARTHROPATHY NOS PELV/THIGH
	71296	CRYSTAL ARTHROPATHY NOS LOW LEG
	71297	CRYS ARTHROPATHY NOS ANKLE/FOOT
	71298	CRYS ARTHROPATHY NOS OTH SITES
	71299	CRYS ARTHROPATHY NOS MULT SITES
	7130	ARTHROPATHY W OTH ENDO/MET DIS
	7131	ARTHROPATHY W GI COND NO INFECT
	7132	ARTHROPATHY W HEMATOLOGICAL DIS
	7133	ARTHROPATHY W DERMATOLOGIC DIS
	7134	ARTHROPATHY W RESPIRATORY DIS
	7135	ARTHROPATHY W NEUROLOGICAL DIS
	7136	ARTHROPATHY WITH HYPERSENS RXN
	7137	OTH GEN DIS W ARTICULAR INVOLV
	7138	ARTHROPATHY W OTH CONDITIONS EC
	7140	RHEUMATOID ARTHRITIS
	7141	FELTY'S SYNDROME
	7142	OTHER RA W VISC/SYS INVOLVEMENT
	71430	POLYARTICULAR JUV RA CHR/NOS
	71431	POLYARTICULAR JUVENILE RA ACUTE
	71432	PAUCIARTICULAR JUVENILE RA
	71433	MONOARTICULAR JUVENILE RA
	7144	CHR POSTRHEUMATIC ARTHROPATHY
	71489	OTH SPEC INFLAM POLYARTHROPATHY
	7149	UNSPEC INFLAM POLYARTHROPATHY
	71500	GEN OSTEOARTHROSIS SITE UNSPEC
	71504	GENERALIZED OSTEOARTHROSIS HAND
	71509	GEN OSTEOARTHROSIS MULT SITES
	71510	LOC PRIMARY OSTEOARTH SITE NOS
	71511	LOC PRIMARY OSTEOARTH SHOULDER
	71512	LOC PRIMARY OSTEOARTH UPPER ARM
	71513	LOC PRIMARY OSTEOARTH FOREARM
	71514	LOC PRIMARY OSTEOARTHROSIS HAND
	71515	LOC PRIM OSTEOARTH PELVIS/THIGH
	71516	LOC PRIMARY OSTEOARTH LOWER LEG
	71517	LOC PRIM OSTEOARTH ANKLE/FOOT
	71518	LOC PRIMARY OSTEOARTH OTH SITES
	71520	LOC SECOND OSTEOARTH SITE NOS
	71521	LOC SECOND OSTEOARTH SHOULDER
	71522	LOC SECOND OSTEOARTH UPPER ARM
	71523	LOC SECONDARY OSTEOARTH FOREARM
	71524	LOC SECONDARY OSTEOARTH HAND
	71525	LOC SECOND OSTEOARTH PELV/THIGH
	71526	LOC SECOND OSTEOARTH LOWER LEG
	71527	LOC SECOND OSTEOARTH ANKLE/FOOT
	71528	LOC SECOND OSTEOARTH OTH SITES
	71530	LOC NOS OSTEOARTHROSIS SITE NOS
	71531	LOC NOS OSTEOARTHROSIS SHOULDER

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
551-555, 558-562 DIAG INV & MANAGEMENT INFLAM MUSCULOSKELETAL		
	71532	LOC NOS OSTEOARTHROSIS UPP ARM
	71533	LOC NOS OSTEOARTHROSIS FOREARM
	71534	LOC NOS OSTEOARTHROSIS HAND
	71535	LOC NOS OSTEOARTH PELVIS/THIGH
	71536	LOC NOS OSTEOARTHROSIS LOW LEG
	71537	LOC NOS OSTEOARTH ANKLE/FOOT
	71538	LOC NOS OSTEOARTHROSIS OTH SITE
	71580	OSTEOARTH MULT SITE NOT GEN NOS
	71589	OSTEOARTH NO GEN SPEC MULT SITE
	71590	OSTEOARTHROSIS NOS SITE UNSPEC
	71591	OSTEOARTHROSIS NOS SHOULDER REG
	71592	OSTEOARTHROSIS NOS UPPER ARM
	71593	OSTEOARTHROSIS NOS FOREARM
	71594	OSTEOARTHROSIS NOS HAND
	71595	OSTEOARTHROSIS NOS PELVIS/THIGH
	71596	OSTEOARTHROSIS NOS LOWER LEG
	71597	OSTEOARTHROSIS NOS ANKLE/FOOT
	71598	OSTEOARTHROSIS NOS OTHER SITES
	71600	KASCHIN-BECK DISEASE SITE NOS
	71601	KASCHIN-BECK DISEASE SHOULDER
	71602	KASCHIN-BECK DISEASE UPPER ARM
	71603	KASCHIN-BECK DISEASE FOREARM
	71604	KASCHIN-BECK DISEASE HAND
	71605	KASCHIN-BECK DISEASE PELV/THIGH
	71606	KASCHIN-BECK DISEASE LOWER LEG
	71607	KASCHIN-BECK DISEASE ANKLE/FOOT
	71608	KASCHIN-BECK DISEASE OTH SITES
	71609	KASCHIN-BECK DISEASE MULT SITES
	71610	TRAUMATIC ARTHROPATHY SITE NOS
	71611	TRAUMATIC ARTHROPATHY SHOULDER
	71612	TRAUMATIC ARTHROPATHY UPPER ARM
	71613	TRAUMATIC ARTHROPATHY FOREARM
	71614	TRAUMATIC ARTHROPATHY HAND
	71615	TRAUM ARTHROPATHY PELVIS/THIGH
	71616	TRAUMATIC ARTHROPATHY LOWER LEG
	71617	TRAUM ARTHROPATHY ANKLE/FOOT
	71618	TRAUMATIC ARTHROPATHY OTH SITES
	71619	TRAUMATIC ARTHROPATHY MULT SITE
	71620	ALLERGIC ARTHRITIS SITE UNSPEC
	71621	ALLERGIC ARTHRITIS SHOULDER REG
	71622	ALLERGIC ARTHRITIS UPPER ARM
	71623	ALLERGIC ARTHRITIS FOREARM
	71624	ALLERGIC ARTHRITIS HAND
	71625	ALLERGIC ARTHRITIS PELVIS/THIGH
	71626	ALLERGIC ARTHRITIS LOWER LEG
	71627	ALLERGIC ARTHRITIS ANKLE/FOOT
	71628	ALLERGIC ARTHRITIS OTHER SITES
	71629	ALLERGIC ARTHRITIS MULT SITES
	71630	CLIMACTERIC ARTHRITIS SITE NOS
	71631	CLIMACTERIC ARTHRITIS SHOULDER
	71632	CLIMACTERIC ARTHRITIS UPPER ARM
	71633	CLIMACTERIC ARTHRITIS FOREARM
	71634	CLIMACTERIC ARTHRITIS HAND
	71635	CLIMACT ARTHRITIS PELVIS/THIGH
	71636	CLIMACTERIC ARTHRITIS LOWER LEG
	71637	CLIMACT ARTHRITIS ANKLE/FOOT
	71638	CLIMACTERIC ARTHRITIS OTH SITES

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
551-555, 558-562 DIAG INV & MANAGEMENT INFLAM MUSCULOSKELETAL		
	71639	CLIMACTERIC ARTHRITIS MULT SITE
	71640	TRANSIENT ARTHROPATHY SITE NOS
	71641	TRANSIENT ARTHROPATHY SHOULDER
	71642	TRANSIENT ARTHROPATHY UPPER ARM
	71643	TRANSIENT ARTHROPATHY FOREARM
	71644	TRANSIENT ARTHROPATHY HAND
	71645	TRANSIENT ARTHRO PELVIS/THIGH
	71646	TRANSIENT ARTHROPATHY LOWER LEG
	71647	TRANSIENT ARTHRO ANKLE/FOOT
	71648	TRANSIENT ARTHROPATHY OTH SITES
	71649	TRANSIENT ARTHROPATHY MULT SITE
	71650	POLYARTHRO/ARTHRITIS SITE NOS
	71651	POLYARTHRO/ARTHRITIS SHOULDER
	71652	POLYARTHRO/ARTHRITIS UPPER ARM
	71653	POLYARTHRO/ARTHRITIS FOREARM
	71654	POLYARTHRO/POLYARTHRITIS HAND
	71655	POLYARTHRO/ARTHRITIS PELV/THIGH
	71656	POLYARTHRO/ARTHRITIS LOWER LEG
	71657	POLYARTHRO/ARTHRITIS ANKLE/FOOT
	71658	POLYARTHRO/ARTHRITIS OTH SITES
	71659	POLYARTHRO/ARTHRITIS MULT SITES
	71660	UNSPEC MONOARTHRITIS SITE NOS
	71661	UNSPEC MONOARTHRITIS SHOULDER
	71662	UNSPEC MONOARTHRITIS UPPER ARM
	71663	UNSPEC MONOARTHRITIS FOREARM
	71664	UNSPECIFIED MONOARTHRITIS HAND
	71665	UNSPEC MONOARTHRITIS PELV/THIGH
	71666	UNSPEC MONOARTHRITIS LOWER LEG
	71667	UNSPEC MONOARTHRITIS ANKLE/FOOT
	71668	UNSPEC MONOARTHRITIS OTH SITES
	71680	OTHER SPEC ARTHROPATHY SITE NOS
	71681	OTHER SPEC ARTHROPATHY SHOULDER
	71682	OTH SPEC ARTHROPATHY UPPER ARM
	71683	OTHER SPEC ARTHROPATHY FOREARM
	71684	OTHER SPEC ARTHROPATHY HAND
	71685	OTH SPEC ARTHROPATHY PELV/THIGH
	71686	OTH SPEC ARTHROPATHY LOWER LEG
	71687	OTH SPEC ARTHROPATHY ANKLE/FOOT
	71688	OTHER SPEC ARTHROPATHY OTH SITE
	71689	OTH SPEC ARTHROPATHY MULT SITES
	71690	ARTHROPATHY UNSPEC SITE NOS
	71691	ARTHROPATHY UNSPEC SHOULDER REG
	71692	ARTHROPATHY UNSPEC UPPER ARM
	71693	ARTHROPATHY UNSPECIFIED FOREARM
	71694	ARTHROPATHY UNSPECIFIED HAND
	71695	ARTHROPATHY UNSPEC PELVIS/THIGH
	71696	ARTHROPATHY UNSPEC LOWER LEG
	71697	ARTHROPATHY UNSPEC ANKLE/FOOT
	71698	ARTHROPATHY UNSPEC OTHER SITES
	71699	ARTHROPATHY UNSPEC MULT SITES
	71850	ANKYLOSIS OF JOINT SITE UNSPEC
	71851	ANKYLOSIS OF JOINT SHOULER REG
	71852	ANKYLOSIS OF JOINT UPPER ARM
	71853	ANKYLOSIS OF JOINT FOREARM
	71854	ANKYLOSIS OF JOINT HAND
	71855	ANKYLOSIS OF JOINT PELVIS/THIGH
	71856	ANKYLOSIS OF JOINT LOWER LEG

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
551-555, 558-562 DIAG INV & MANAGEMENT INFLAM MUSCULOSKELETAL		
	71857	ANKYLOSIS OF JOINT ANKLE/FOOT
	71858	ANKYLOSIS OF JOINT OTHER SITES
	71859	ANKYLOSIS OF JOINT MULT SITES
	71921	VILLONODULAR SYNOVITIS SHOULDER
	71922	VILLONODULAR SYNOVITIS UPP ARM
	71923	VILLONODULAR SYNOVITIS FOREARM
	71924	VILLONODULAR SYNOVITIS HAND
	71925	VILLONODULAR SYNOVITIS PELVIS
	71926	VILLONODULAR SYNOVITIS LOW LEG
	71927	VILLONODULAR SYNOVIT ANKLE/FOOT
	71928	VILLONODULAR SYNOVITIS OTH SITE
	71929	VILLONODULAR SYNOVIT MULT SITES
	71930	PALINDROMIC RHEUMATISM SITE NOS
	71931	PALINDROMIC RHEUMATISM SHOULDER
	71932	PALINDROMIC RHEUMATISM UPP ARM
	71933	PALINDROMIC RHEUMATISM FOREARM
	71934	PALINDROMIC RHEUMATISM HAND
	71935	PALINDROMIC RHEUMATISM PELVIS
	71936	PALINDROMIC RHEUMATISM LOW LEG
	71937	PALINDROMIC RHEUMAT ANKLE/FOOT
	71938	PALINDROMIC RHEUMATISM OTH SITE
	71939	PALINDROMIC RHEUMAT MULT SITES
	71940	PAIN IN JOINT SITE UNSPECIFIED
	7200	ANKYLOSING SPONDYLITIS
	7201	SPINAL ENTHESOPATHY
	7202	SACROILIITIS NEC
	72081	INFLAM SPONDYLOPATHIES DIS EC
	72089	OTHER INFLAM SPONDYLOPATHIES
	7209	UNSPEC INFLAM SPONDYLOPATHY
	7210	CERV SPONDYLOSIS NO MYELOPATHY
	7211	CERV SPONDYLOSIS W MYELOPATHY
	7212	THORAC SPONDYLOS NO MYELOPATHY
	72141	THORAC SPONDYLOSIS W MYELOPATHY
	7215	KISSING SPINE
	7216	ANKYLOSING VERTEBRAL HYPEROSTOS
	7217	TRAUMATIC SPONDYLOPATHY
	7218	OTHER ALLIED DISORDERS OF SPINE
	72190	SPONDYLOSIS SITE NOS NO MYELOP
	72191	SPONDYLOSIS SITE NOS W MYELOP
	72270	DISC DISORD W MYELOP UNSPEC REG
	72271	CERVICAL DISC DISORD W MYELOP
	72272	THORACIC DISC DISORD W MYELOP
	72400	SPINAL STENOSIS UNSPEC REGION
	72401	SPINAL STENOSIS THORACIC REGION
	72409	SPINAL STENOSIS OTHER REGION
	725	POLYMYALGIA RHEUMATICA
	7290	RHEUMATISM UNSPEC/FIBROSITIS
	7291	MYALGIA AND MYOSITIS UNSPEC
	73030	PERIOSTITIS NO OSTEO SITE NOS
	73031	PERIOSTITIS NO OSTEO SHOULDER
	73032	PERIOSTITIS NO OSTEO UPPER ARM
	73033	PERIOSTITIS NO OSTEO FOREARM
	73034	PERIOSTITIS NO OSTEO HAND
	73035	PERIOSTITIS NO OSTEO PELV/THIGH
	73036	PERIOSTITIS NO OSTEO LOWER LEG
	73037	PERIOSTITIS NO OSTEO ANKLE/FOOT
	73038	PERIOSTITIS NO OSTEO OTH SITES

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
551-555, 558-562 DIAG INV & MANAGEMENT INFLAM MUSCULOSKELETAL		
	73039	PERIOSTITIS NO OSTEO MULT SITES
	73070	OSTEOPATHY FROM POLIO SITE NOS
	73071	OSTEOPATHY FROM POLIO SHOULDER
	73072	OSTEOPATHY FROM POLIO UPPER ARM
	73073	OSTEOPATHY FROM POLIO FOREARM
	73074	OSTEOPATHY FROM POLIO HAND
	73075	OSTEOPATHY FR POLIO PELV/THIGH
	73076	OSTEOPATHY FROM POLIO LOWER LEG
	73077	OSTEOPATHY FR POLIO ANKLE/FOOT
	73078	OSTEOPATHY FROM POLIO OTH SITES
	73079	OSTEOPATHY FROM POLIO MULT SITE
	7310	OSTEITIS DEFORMANS NO BONE TUM
	7311	OSTEITIS DEFORMANS IN DIS EC
	7312	HYPERTROPH PULM OSTEOARTHROPTHY
	7318	OTH BONE INVOLVEMENT IN DIS EC
	7320	JUVENILE OSTEOCHONDROSIS SPINE
	7321	JUV OSTEOCHONDROSIS HIP/PELVIS
	7322	NONTRAUM SLIP UPP FEM EPIPHYSIS
	7323	JUV OSTEOCHONDROSIS UPP EXTREM
	7324	JUV OSTEOCHONDROSIS LOW EXTREM
	7325	JUVENILE OSTEOCHONDROSIS FOOT
	7326	OTHER JUVENILE OSTEOCHONDROSIS
	7327	OSTEOCHONDRITIS DISSECANS
	7328	OTH SPEC FORM OSTEOCHONDROPATHY
	7329	UNSPECIFIED OSTEOCHONDROPATHY
	73300	OSTEOPOROSIS UNSPECIFIED
	73301	SENILE OSTEOPOROSIS
	73302	IDIOPATHIC OSTEOPOROSIS
	73303	DISUSE OSTEOPOROSIS
	73309	OTHER OSTEOPOROSIS
	73340	ASEPTIC NECROSIS BONE SITE NOS
	73341	ASEPTIC NECROSIS HEAD HUMERUS
	73342	ASEPTIC NECROS HEAD/NECK FEMUR
	73343	ASEPTIC NECROS MED FEM CONDYLE
	73344	ASEPTIC NECROSIS TALUS
	73349	ASEPTIC NECROSIS OTHER BONE
	7335	OSTEITIS CONDENSANS
	73392	CHONDROMALACIA
	79417	ABNORMAL ELECTROMYOGRAM

ACCS CELL
556-557, 563-564 Other Musculoskeletal

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
556-557, 563-564 DIAG INV & MANAGEMENT OTHER MUSCULOSKELETAL		
	04081	TROPICAL PYOMYOSITIS
	09161	SECOND SYPHILITIC PERIOSTITIS
	1361	BEHCET'S SYNDROME
	2130	BEN NEOPLASM BONES SKULL/FACE
	2132	BEN NEO VERT COL EXC SAC/COCCYX
	2134	BEN NEO LONG BONE UPP LIMB/SCAP
	2135	BEN NEO SHORT BONES UPPER LIMB
	2136	BEN NEO PELVIC BONES/SAC/COCCYX
	2137	BEN NEO LONG BONES LOWER LIMB
	2138	BEN NEO SHORT BONES LOWER LIMB
	2139	BEN NEO BONE/ARTIC CART UNSPEC
	2680	RICKETS ACTIVE
	2681	RICKETS LATE EFFECT
	2682	OSTEOMALACIA UNSPECIFIED
	2794	AUTOIMMUNE DISEASE NEC
	3060	MUSCULOSKEL MALFUNCT MENT FACT
	38001	ACUTE PERICHONDRITIS OF PINNA
	38002	CHRONIC PERICHONDRITIS OF PINNA
	390	RHEUMATIC FEVER NO HEART INVOLV
	6960	PSORIATIC ARTHROPATHY
	7170	OLD BUCK HANDLE TEAR MED MENISC
	7171	DERANGEMENT ANT HORN MED MENISC
	7172	DERANGE POST HORN MED MENISCUS
	7173	OTH/UNSPEC DERANGE MED MENISCUS
	71740	DERANGE LATERAL MENISCUS UNSPEC
	71741	BUCKET HANDLE TEAR LAT MENISCUS
	71742	DERANGE ANT HORN LAT MENISCUS
	71743	DERANGE POST HORN LAT MENISCUS
	71749	OTHER DERANGE LATERAL MENISCUS
	7175	DERANGEMENT OF MENISCUS NEC
	7176	LOOSE BODY IN KNEE
	7177	CHONDROMALACIA OF PATELLA
	71781	OLD DISRUPT LAT COLLAT LIGAMENT
	71782	OLD DISRUPT MED COLLAT LIGAMENT
	71783	OLD DISRUPTION ANT CRUCIATE LIG
	71784	OLD DISRUPT POST CURCIATE LIG
	71785	OLD DISRUPT OTH LIGAMENTS KNEE
	71789	OTHER INTERNAL DERANGEMENT KNEE
	7179	UNSPEC INTERNAL DERANGE KNEE
	71800	ARTIC CARTILAGE DISORD SITE NOS
	71801	ARTIC CARTILAGE DISORD SHOULDER
	71802	ARTIC CARTILAGE DISORD UPP ARM
	71803	ARTIC CARTILAGE DISORD FOREARM
	71804	ARTICULAR CARTILAGE DISORD HAND
	71805	ARTIC CART DISORD PELVIS/THIGH
	71807	ARTIC CART DISORD ANKLE/FOOT
	71808	ARTIC CARTILAGE DISORD OTH SITE
	71809	ARTIC CART DISORD MULTIPLE SITE
	71810	LOOSE BODY IN JOINT SITE UNSPEC
	71811	LOOSE BODY IN JOINT SHOULDER
	71812	LOOSE BODY IN JOINT UPPER ARM
	71813	LOOSE BODY IN JOINT FOREARM

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
556-557, 563-564 DIAG INV & MANAGEMENT OTHER MUSCULOSKELETAL		
	71814	LOOSE BODY IN JOINT HAND
	71815	LOOSE BODY IN JOINT PELV/THIGH
	71817	LOOSE BODY IN JOINT ANKLE/FOOT
	71818	LOOSE BODY IN JOINT OTHER SITES
	71819	LOOSE BODY IN JOINT MULT SITES
	71820	PATHOLOGICAL DISLOCATN SITE NOS
	71821	PATHOLOGICAL DISLOCATN SHOULDER
	71822	PATHOLOGICAL DISLOCATN UPP ARM
	71823	PATHOLOGICAL DISLOCATN FOREARM
	71824	PATHOLOGICAL DISLOCATION HAND
	71825	PATHOLOGIC DISLOCATN PELV/THIGH
	71826	PATHOLOGICAL DISLOCATN LOW LEG
	71827	PATHOLOGIC DISLOCATN ANKLE/FOOT
	71828	PATHOLOGIC DISLOCATN OTH SITES
	71829	PATHOLOGIC DISLOCATN MULT SITES
	71830	RECUR DISLOCATN JOINT SITE NOS
	71831	RECUR DISLOCATN JOINT SHOULDER
	71832	RECUR DISLOCATN JOINT UPPER ARM
	71833	RECUR DISLOCATION JOINT FOREARM
	71834	RECUR DISLOCATION JOINT HAND
	71835	RECUR DISLOCATION JOINT PELVIS
	71836	RECUR DISLOCATION JOINT LOW LEG
	71837	RECUR DISLOCATN JOINT ANKL/FOOT
	71838	RECUR DISLOCATN JOINT OTH SITES
	71839	RECUR DISLOCATN JOINT MULT SITE
	71840	CONTRACTURE JOINT SITE UNSPEC
	71841	CONTRACTURE JOINT SHOULDER REG
	71842	CONTRACTURE OF JOINT UPPER ARM
	71843	CONTRACTURE OF JOINT FOREARM
	71844	CONTRACTURE OF JOINT HAND
	71845	CONTRACTURE JOINT PELVIS/THIGH
	71846	CONTRACTURE OF JOINT LOWER LEG
	71847	CONTRACTURE OF JOINT ANKLE/FOOT
	71848	CONTRACTURE OF JOINT OTH SITES
	71849	CONTRACTURE OF JOINT MULT SITES
	71860	PROTRUSION ACETABULUM UNSPEC
	71865	PROTRUSION ACETABULUM PELVIS
	71880	OTH JOINT DERANGE NEC SITE NOS
	71881	OTH JOINT DERANGE NEC SHOULDER
	71882	OTH JOINT DERANGE NEC UPPER ARM
	71883	OTHER JOINT DERANGE NEC FOREARM
	71884	OTH JOINT DERANGEMENT NEC HAND
	71885	OTH JOINT DERANG NEC PELV/THIGH
	71886	OTH JOINT DERANGE NEC LOWER LEG
	71887	OTH JOINT DERANGE NEC ANKL/FOOT
	71888	OTH JOINT DERANGE NEC OTH SITES
	71889	OTH JOINT DERANGE NEC MULT SITE
	71890	UNSPEC DERANGE JOINT SITE NOS
	71891	UNSPEC DERANGE JOINT SHOULDER
	71892	UNSPEC DERANGE JOINT UPPER ARM
	71893	UNSPEC DERANGE JOINT FOREARM
	71894	UNSPEC DERANGEMENT JOINT HAND
	71895	UNSPEC DERANGE JOINT PELV/THIGH
	71897	UNSPEC DERANGE JOINT ANKLE/FOOT
	71898	UNSPEC DERANGE JOINT OTH SITES
	71899	UNSPEC DERANGE JOINT MULT SITES

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
556-557, 563-564 DIAG INV & MANAGEMENT OTHER MUSCULOSKELETAL		
	71900	EFFUSION OF JOINT SITE UNSPEC
	71901	EFFUSION OF JOINT SHOULDER REG
	71902	EFFUSION OF JOINT UPPER ARM
	71903	EFFUSION OF JOINT FOREARM
	71904	EFFUSION OF JOINT HAND
	71905	EFFUSION OF JOINT PELVIS/THIGH
	71906	EFFUSION OF JOINT LOWER LEG
	71907	EFFUSION OF JOINT ANKLE/FOOT
	71908	EFFUSION OF JOINT OTHER SITES
	71909	EFFUSION OF JOINT MULT SITES
	71910	HEMARTHROSIS SITE UNSPECIFIED
	71911	HEMARTHROSIS SHOULDER REGION
	71912	HEMARTHROSIS UPPER ARM
	71913	HEMARTHROSIS FOREARM
	71914	HEMARTHROSIS HAND
	71915	HEMARTHROSIS PELVIS/THIGH
	71916	HEMARTHROSIS LOWER LEG
	71917	HEMARTHROSIS ANKLE/FOOT
	71918	HEMARTHROSIS OTHER SPEC SITES
	71919	HEMARTHROSIS MULTIPLE SITES
	71920	VILLONODULAR SYNOVITIS SITE NOS
	71941	PAIN IN JOINT SHOULDER REGION
	71942	PAIN IN JOINT UPPER ARM
	71943	PAIN IN JOINT FOREARM
	71944	PAIN IN JOINT HAND
	71945	PAIN IN JOINT PELVIS/THIGH
	71946	PAIN IN JOINT LOWER LEG
	71947	PAIN IN JOINT ANKLE/FOOT
	71948	PAIN IN JOINT OTHER SPEC SITES
	71949	PAIN IN JOINT MULTIPLE SITES
	71950	STIFFNESS OF JOINT NEC SITE NOS
	71951	STIFFNESS OF JOINT NEC SHOULDER
	71952	STIFFNESS OF JOINT NEC UPP ARM
	71953	STIFFNESS OF JOINT NEC FOREARM
	71954	STIFFNESS OF JOINT NEC HAND
	71955	STIFFNESS JOINT NEC PELV/THIGH
	71956	STIFFNESS OF JOINT NEC LOW LEG
	71957	STIFFNESS JOINT NEC ANKLE/FOOT
	71958	STIFFNESS JOINT NEC OTHER SITES
	71959	STIFFNESS JOINT NEC MULT SITES
	71960	OTHER SYMPTOMS JOINT SITE NOS
	71961	OTHER SYMPTOMS JOINT SHOULDER
	71962	OTHER SYMPTOMS JOINT UPPER ARM
	71963	OTHER SYMPTOMS JOINT FOREARM
	71964	OTHER SYMPTOMS JOINT HAND
	71965	OTHER SYMPTOMS JOINT PELV/THIGH
	71966	OTHER SYMPTOMS JOINT LOWER LEG
	71967	OTHER SYMPTOMS JOINT ANKLE/FOOT
	71968	OTHER SYMPTOMS JOINT OTH SITES
	71969	OTHER SYMPTOMS JOINT MULT SITES
	71970	DIFFICULTY IN WALKING SITE NOS
	71975	DIFFICULTY WALKING PELV/THIGH
	71976	DIFFICULTY IN WALKING LOWER LEG
	71977	DIFFICULTY WALKING ANKLE/FOOT
	71978	DIFFICULTY IN WALKING OTH SITES
	71979	DIFFICULTY IN WALKING MULT SITE

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
556-557, 563-564 DIAG INV & MANAGEMENT OTHER MUSCULOSKELETAL		
	71980	OTH SPEC DISORD JOINT SITE NOS
	71981	OTH SPEC DISORD JOINT SHOULDER
	71982	OTH SPEC DISORD JOINT UPPER ARM
	71983	OTH SPEC DISORDER JOINT FOREARM
	71984	OTHER SPEC DISORDER JOINT HAND
	71985	OTH SPEC DIS JOINT PELVIS/THIGH
	71986	OTH SPEC DISORD JOINT LOWER LEG
	71987	OTH SPEC DISORD JOINT ANKL/FOOT
	71988	OTH SPEC DISORD JOINT OTH SITES
	71989	OTH SPEC DISORD JOINT MULT SITE
	71990	UNSPEC DISORDER JOINT SITE NOS
	71991	UNSPEC DISORDER JOINT SHOULDER
	71992	UNSPEC DISORDER JOINT UPPER ARM
	71993	UNSPEC DISORDER JOINT FOREARM
	71994	UNSPECIFIED DISORDER JOINT HAND
	71995	UNSPEC DISORD JOINT PELV/THIGH
	71996	UNSPEC DISORDER JOINT LOWER LEG
	71997	UNSPEC DISORD JOINT ANKLE/FOOT
	71998	UNSPEC DISORDER JOINT OTH SITES
	71999	UNSPEC DISORDER JOINT MULT SITE
	7213	LUMBOSACRAL SPONDYLOS NO MYELOP
	72142	LUMBAR SPONDYLOSIS W MYELOPATHY
	7220	DISPLAC CERVICAL DISC NO MYELOP
	72210	DISPLAC LUMBAR DISC NO MYELOP
	72211	DISPLAC THORAC DISC NO MYELOP
	7222	DISPLAC DISC NOS NO MYELOPATHY
	72230	SCHMORL'S NODES UNSPEC REGION
	72231	SCHMORL'S NODES THORACIC REGION
	72232	SCHMORL'S NODES LUMBAR REGION
	72239	SCHMORL'S NODES OTHER REGION
	7224	DEGEN CERVICAL INTERVERT DISC
	72251	DEGEN THORAC/THORACOLUMBAR DISC
	72252	DEGEN LUMBAR/LUMBOSACRAL DISC
	7226	DEGEN INTERVERTEBRAL DISC NOS
	72273	LUMBAR DISC DISORD W MYELOPATHY
	72280	POSTLAMINECTOMY SYND UNSPEC REG
	72281	POSTLAMINECTOMY SYND CERVICAL
	72282	POSTLAMINECTOMY SYND THORACIC
	72283	POSTLAMINECTOMY SYND LUMBAR REG
	72290	OTH/NOS DISC DISORD UNSPEC REG
	72291	OTH/NOS DISC DISORD CERVICAL
	72292	OTH/NOS DISC DISORD THORACIC
	72293	OTH/NOS DISC DISORD LUMBAR REG
	7230	SPINAL STENOSIS CERVICAL REGION
	7231	CERVICALGIA
	7235	TORTICOLLIS UNSPECIFIED
	7237	OSSIF POST LONGIT LIG CERV REG
	7238	OTH SYNDROMES AFFECT CERV REG
	7239	UNSPEC DISORDERS/SYMPTOMS NECK
	72402	SPINAL STENOSIS LUMBAR REGION
	7241	PAIN IN THORACIC SPINE
	7242	LUMBAGO
	7243	SCIATICA
	7244	THOR/LUMBOSAC NEURIT/RADIC NOS
	7245	BACKACHE UNSPECIFIED
	7246	DISORDERS OF SACRUM

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
556-557, 563-564 DIAG INV & MANAGEMENT OTHER MUSCULOSKELETAL		
	72470	UNSPECIFIED DISORDERS OF COCCYX
	72471	HYPERMOBILITY OF COCCYX
	72479	OTHER DISORDERS OF COCCYX
	7248	OTH SYMPTOMS REFERABLE TO BACK
	7249	OTH UNSPECIFIED BACK DISORDERS
	72673	CALCANEAL SPUR
	72691	EXOSTOSIS OF UNSPECIFIED SITE
	72702	GIANT CELL TUMOR TENDON SHEATH
	72703	TRIGGER FINGER (ACQUIRED)
	7271	BUNION
	72740	SYNOVIAL CYST UNSPECIFIED
	72741	GANGLION OF JOINT
	72742	GANGLION OF TENDON SHEATH
	72743	GANGLION UNSPECIFIED
	72749	OTH GANGLN/CYST SYNOV/TEND/BURS
	72750	RUPTURE OF SYNOVIUM UNSPECIFIED
	72751	SYNOVIAL CYST POPLITEAL SPACE
	72759	OTHER RUPTURE OF SYNOVIUM
	72760	NONTRAUMATIC RUPTURE TENDON NOS
	72781	CONTRACTURE OF TENDON (SHEATH)
	72782	CALCIUM DEPOSITS TENDON/BURSA
	72789	OTH DISORD SYNOVIUM/TEND/BURSA
	7279	DISORD SYNOVIUM/TEND/BURSA NOS
	72810	MUSC CALCIFICATN/OSSIFICATN NOS
	72813	POSTOP HETEROTOPIC CALCIFICATN
	72819	OTH MUSC CALCIFICATN/OSSIFICATN
	7282	MUSC WASTING/DISUSE ATROPHY NEC
	7283	OTH SPECIFIED MUSCLE DISORDERS
	7284	LAXITY OF LIGAMENT
	7285	HYPERMOBILITY SYNDROME
	7286	CONTRACTURE OF PALMAR FASCIA
	72871	PLANTAR FASCIAL FIBROMATOSIS
	72879	OTHER FIBROMATOSES
	72882	FOREIGN BODY GRANULOMA MUSCLE
	72883	RUPTURE OF MUSCLE NONTRAUMATIC
	72884	DIASTASIS OF MUSCLE
	72885	SPASM OF MUSCLE
	72886	NECROTIZING FASCITIS
	72889	OTH DISORDERS MUSCLE/LIG/FASCIA
	7289	DISORDER MUSCLE/LIG/FASCIA NOS
	7295	PAIN IN LIMB
	72981	SWELLING OF LIMB
	72982	CRAMP
	72989	OTH SYMPTOMS REFERABLE TO LIMBS
	7299	OTH/UNSPEC DISORDER SOFT TISSUE
	73310	PATHOLOGIC FRACTURE UNSPEC SITE
	73311	PATHOLOGIC FRACTURE HUMERUS
	73312	PATHOLOGIC FRACT DIST RAD/ULNA
	73313	PATHOLOGIC FRACTURE VERTEBRAE
	73314	PATHOLOGIC FRACT NECK OF FEMUR
	73315	PATHOLOGIC FRACT OTH PART FEMUR
	73316	PATHOLOGIC FRACTURE TIB/FIBULA
	73319	PATHOLOGIC FRACT OTH SPEC SITE
	73320	CYST OF BONE (LOCAL) UNSPEC
	73321	SOLITARY BONE CYST
	73322	ANEURYSMAL BONE CYST

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
556-557, 563-564 DIAG INV & MANAGEMENT OTHER MUSCULOSKELETAL		
	73329	OTHER CYST OF BONE
	7333	HYPEROSTOSIS OF SKULL
	7337	ALGONEURODYSTROPHY
	73381	MALUNION OF FRACTURE
	73382	NONUNION OF FRACTURE
	73390	DISORDER BONE/CARTILAGE UNSPEC
	73391	ARREST BONE DEVELOPMENT/GROWTH
	73399	OTHER DISORDERS BONE/CARTILAGE
	734	FLAT FOOT
	7350	HALLUX VALGUS (ACQUIRED)
	7351	HALLUX VARUS (ACQUIRED)
	7352	HALLUX RIGIDUS
	7353	HALLUX MALLEUS
	7354	OTHER HAMMER TOE (ACQUIRED)
	7355	CLAWTOE (ACQUIRED)
	7358	OTHER ACQUIRED DEFORMITIES TOE
	7359	UNSPEC ACQUIRED DEFORMITY TOE
	73600	UNSPEC DEFORM FOREARM EXC FING
	73601	CUBITUS VALGUS (ACQUIRED)
	73602	CUBITUS VARUS (ACQUIRED)
	73603	VALGUS DEFORMITY WRIST (ACQUIR)
	73604	VARUS DEFORMITY WRIST (ACQUIR)
	73605	WRIST DROP (ACQUIRED)
	73606	CLAW HAND (ACQUIRED)
	73607	CLUB HAND ACQUIRED
	73609	OTH DEFORMITY FOREARM EXC FING
	7361	MALLET FINGER
	73620	ACQUIRED DEFORMITIES FINGER NOS
	73621	BOUTONNIERE DEFORMITY
	73622	SWAN-NECK DEFORMITY
	73629	OTH ACQUIRED DEFORMITIES FINGER
	73630	ACQUIRED DEFORMITIES OF HIP NOS
	73631	COXA VALGA (ACQUIRED)
	73632	COXA VARA (ACQUIRED)
	73639	OTHER ACQUIRED DEFORMITIES HIP
	73641	GENU VALGUM (ACQUIRED)
	73642	GENU VARUM (ACQUIRED)
	7365	GENU RECURVATUM (ACQUIRED)
	7366	OTHER ACQUIRED DEFORMITIES KNEE
	73670	ACQUIRED DEFORM ANKLE/FOOT NOS
	73671	ACQUIRED EQUINOVARUS DEFORMITY
	73672	EQUINUS DEFORMITY FOOT ACQUIRED
	73673	CAVUS DEFORMITY OF FOOT
	73674	CLAW FOOT ACQUIRED
	73675	CAVOVARUS DEFORMITY FOOT ACQUIR
	73676	OTHER CALCANEUS DEFORMITY
	73679	OTH ACQUIRED DEFORM ANKLE/FOOT
	73681	UNEQUAL LEG LENGTH ACQUIRED
	73689	ACQUIRED DEFORM OTH PARTS LIMBS
	7369	ACQUIR DEFORMITY LIMB SITE NOS
	7370	ADOLESCENT POSTURAL KYPHOSIS
	73710	KYPHOSIS (ACQUIRED)(POSTURAL)
	73711	KYPHOSIS DUE TO RADIATION
	73712	KYPHOSIS POSTLAMINECTOMY
	73719	OTHER KYPHOSIS (ACQUIRED)
	73720	LORDOSIS (ACQUIRED) (POSTURAL)

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
556-557, 563-564 DIAG INV & MANAGEMENT OTHER MUSCULOSKELETAL		
	73721	LORDOSIS POSTLAMINECTOMY
	73722	OTHER POSTSURGICAL LORDOSIS
	73729	OTHER LORDOSIS (ACQUIRED)
	73730	SCOLIOSIS(AND KYPHOSCOLIOS)IDIO
	73731	RESOLVING INFANT IDIO SCOLIOSIS
	73732	PROG INFANTILE IDIO SCOLIOSIS
	73733	SCOLIOSIS DUE TO RADIATION
	73734	THORACOGENIC SCOLIOSIS
	73739	OTHER KYPHOSCOLIOSIS/SCOLIOSIS
	73740	CURVATURE SPINE NOS W OTH COND
	73741	KYPHOSIS WITH OTHER CONDITION
	73742	LORDOSIS WITH OTHER CONDITION
	73743	SCOLIOSIS WITH OTHER CONDITION
	7378	OTHER CURVATURES OF SPINE
	7379	UNSPECIFIED CURVATURE OF SPINE
	73810	UNSPECIFIED DEFORMITY OF HEAD
	73811	ZYGOMATIC HYPERPLASIA
	73812	ZYGOMATIC HYPOPLASIA
	73819	OTH SPEC DEFORMITY OF HEAD
	7382	ACQUIRED DEFORMITY OF NECK
	7383	ACQUIRED DEFORMITY OF CHEST/RIB
	7384	ACQUIRED SPONDYLOLISTHESIS
	7385	OTH ACQUIR DEFORMITY BACK/SPINE
	7386	ACQUIRED DEFORMITY OF PELVIS
	7388	ACQUIR DEFORMITY OTH SPEC SITE
	7389	ACQUIRED DEFORMITY UNSPEC SITE
	7390	NONALLOPATH LES HEAD REGION NEC
	7391	NONALLOPATH LES CERV REGION NEC
	7392	NONALLOPATH LES THORAC REG NEC
	7393	NONALLOPATH LES LUMBAR REG NEC
	7394	NONALLOPATH LES SACRAL REG NEC
	7395	NONALLOPATH LES PELVIC REG NEC
	7396	NONALLOPATH LES LOW EXTREM NEC
	7397	NONALLOPATH LES UPP EXTREM NEC
	7398	NONALLOPATH LESION RIB CAGE NEC
	7399	NONALLOPATH LES ABDOMEN/OTH NEC
	7866	SWELLING/MASS/LUMP IN CHEST
	9586	VOLKMANN'S ISCHEMIC CONTRACTURE
	9949	OTHER EFFECTS EXTERNAL CAUSES
	9964	MECH COMPL ORTHO DEV/IMPL/GRAFT
	99652	MECH COMPL GRAFT OTH TISSUE NEC
	99655	MECH COMPL D/T ARTIF SKIN GRAFT
	99659	MECH COMPL OTH DEV/IMPL/GRF NEC
	99660	INFECT/INFLAM DEV/IMPL/GRF NOS
	99670	OTH COMPL INT DEV/IMPL/GRF NOS
	99677	OTH COMPL INTERNAL JOINT PROSTH
	99678	OTH COMPL OTH ORTHO DEV/IMP/GRF
	99679	OTH COMPL OTH INT DEV/IMPL/GRF
	99680	COMPLICATN TRANSPLANT ORGAN NOS
	99689	COMPL OTH SPEC TRANSPLANT ORGAN
	99690	COMPLICATN REATTACH EXTREM NOS
	99691	COMPLICATION REATTACHED FOREARM
	99692	COMPLICATION REATTACHED HAND
	99693	COMPLICATION REATTACHED FINGER
	99694	COMPL REATTACH UPP EXTREM NOS
	99695	COMPLICATION REATTACH FOOT/TOE

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
556-557, 563-564 DIAG INV & MANAGEMENT OTHER MUSCULOSKELETAL		
	99696	COMPL REATTACH LOW EXTREM NOS
	99699	COMPL REATTACH OTHER SPEC PART
	99760	UNSPEC LATE AMPUT STUMP COMPL
	99761	NEUROMA OF AMPUTATION STUMP
	99769	OTH LATE AMPUTATION STUMP COMPL
	99799	OTH COMPL AFFECT OTH SPEC BODY SYS
	V424	BONE REPLACED BY TRANSPLANT
	V437	LIMB REPLACED BY OTHER MEANS
	V520	FITTING/ADJUST ARTIFICIAL ARM
	V521	FITTING/ADJUST ARTIFICIAL LEG
	V528	FIT/ADJUST OTH SPEC PROSTH DEV
	V529	FIT/ADJUST UNSPEC PROSTH DEVICE
	V537	FITTING/ADJUST ORTHOPEDIC DEV
	V538	FITTING/ADJUSTMENT WHEELCHAIR
	V539	FITTING/ADJUST OTHER/UNSPEC DEV
	V540	AFTERCARE REMOV # PLATE/INT FIX
	V548	OTHER ORTHOPEDIC AFTERCARE
	V549	UNSPEC ORTHOPEDIC AFTERCARE
	V5781	ORTHOTIC TRAINING
	V674	FOLLOW-UP EXAM FOLL TX FRACTURE

ACCS CELL
565-566 Congenital Musculoskeletal Deformities

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
565-566 DIAG INV & MANAGEMENT CONGENITAL MUSCULOSKELETAL DEFORMITIES		
	7540	CONGEN MS DEFORM SKULL/FACE/JAW
	7541	CONGEN MS DEFORM STERNOCLEIDOM
	7542	CONGEN MS DEFORMITIES OF SPINE
	75430	CONGEN DISLOCATION HIP UNILAT
	75431	CONGEN DISLOCATION HIP BILAT
	75432	CONGEN SUBLUXATION HIP UNILAT
	75433	CONGEN SUBLUXATION HIP BILAT
	75435	CONGEN DISLOC W SUBLUX OTH HIP
	75440	CONGENITAL GENU RECURVATUM
	75441	CONGENITAL DISLOCATION KNEE
	75442	CONGENITAL BOWING OF FEMUR
	75443	CONGENITAL BOWING TIBIA/FIBULA
	75444	CONGEN BOWING LONG BONE LEG NOS
	75450	TALIPES VARUS
	75451	TALIPES EQUINOVARUS
	75452	METATARSUS PRIMUS VARUS
	75453	METATARSUS VARUS
	75459	OTHER VARUS DEFORMITIES OF FEET
	75460	TALIPES VALGUS
	75461	CONGENITAL PES PLANUS
	75462	TALIPES CALCANEOVALGUS
	75469	OTH VALGUS DEFORMITIES OF FEET
	75470	TALIPES UNSPECIFIED
	75471	TALIPES CAVUS
	75479	OTHER DEFORMITIES OF FEET
	75489	OTH SPEC NONTERATOGENEC MS ANOM
	75500	POLYDACTYLY UNSPECIFIED DIGITS
	75501	POLYDACTYLY OF FINGERS
	75502	POLYDACTYLY OF TOES
	75510	SYNDACTYLY MULTIPLE/UNSPEC SITE
	75511	SYNDACTYLY FINGERS NO FUS BONE
	75512	SYNDACTYLY FINGERS W FUS BONE
	75513	SYNDACTYLY TOES NO FUSION BONE
	75514	SYNDACTYLY TOES W FUSION BONE
	75520	REDUCTION DEFORM UPP LIMB NOS
	75521	TRANSVERSE DEFICIENCY UPP LIMB
	75522	LONGIT DEFICIENCY UPP LIMB NEC
	75523	LONGIT DEFIC HUMERUS/RAD/ULNA
	75524	LONGIT DEFIC HUMERAL COMP/PART
	75525	LONGIT DEFIC RAD/ULNA COMP/PART
	75526	LONGIT DEFIC RADIAL COMP/PART
	75527	LONGIT DEFIC ULNAR COMP/PARTIAL
	75528	LONGIT DEFIC MET/CARP COMP/PART
	75529	LONGIT DEFIC PHALANG COMP/PART
	75530	REDUCTION DEFORM LOW LIMB NOS
	75531	TRANSVERSE DEFICIENCY LOW LIMB
	75532	LONGIT DEFICIENCY LOW LIMB NEC
	75533	LONGIT DEFICIENCY FEMUR/TIB/FIB
	75534	LONGIT DEFIC FEMORAL COMP/PART
	75535	LONGIT DEFIC TIB/FIB COMP/PART
	75536	LONGIT DEFIC TIBIAL COMP/PART
	75537	LONGIT DEFIC FIBULAR COMP/PART

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
565-566 DIAG INV & MANAGEMENT CONGENITAL MUSCULOSKELETAL DEFORMITIES		
	75538	LONGIT DEFIC MET/TARS COMP/PART
	75539	LONGIT DEFIC PHALANG COMPL/PART
	7554	REDUCTION DEFORM UNSPEC LIMB
	75550	UNSPEC ANOMALY OF UPPER LIMB
	75551	CONGENITAL DEFORMITY CLAVICLE
	75552	CONGENITAL ELEVATION OF SCAPULA
	75553	RADIOULNAR SYNOSTOSIS
	75554	MADELUNG'S DEFORMITY
	75555	ACROCEPHALOSYNDACTYLY
	75556	ACCESSORY CARPAL BONES
	75557	MACRODACTYLIA (FINGERS)
	75558	CLEFT HAND CONGENITAL
	75559	OTHER ANOM UPPER LIMB/SHOULDER
	75560	UNSPEC ANOMALY OF LOWER LIMB
	75561	COXA VALGA CONGENITAL
	75562	COXA VARA CONGENITAL
	75563	OTH CONGEN DEFORMITY HIP(JOINT)
	75564	CONGEN DEFORMITY KNEE (JOINT)
	75565	MACRODACTYLIA OF TOES
	75566	OTHER ANOMALIES OF TOES
	75567	ANOMALIES OF FOOT NEC
	75569	OTHER ANOM LOWER LIMB/PELVIS
	7558	OTH SPEC ANOMALIES UNSPEC LIMB
	7559	UNSPEC ANOMALIES UNSPEC LIMB
	7560	ANOMALIES OF SKULL/FACE BONES
	75610	ANOMALY OF SPINE UNSPECIFIED
	75611	SPONDYLOLYSIS LUMBOSACRAL REG
	75612	SPONDYLOLISTHESIS
	75613	ABSENCE OF VERTEBRA CONGENITAL
	75614	HEMIVERTEBRA
	75615	FUSION SPINE (VERTEBRA) CONGEN
	75616	KLIPPEL-FEIL SYNDROME
	75619	OTHER ANOMALIES OF SPINE
	7562	CERVICAL RIB
	7564	CHONDRODYSTROPHY
	75650	OSTEODYSTROPHY UNSPECIFIED
	75651	OSTEOGENESIS IMPERFECTA
	75652	OSTEOPETROSIS
	75653	OSTEOPOIKILOSIS
	75654	POLYOSTOTIC FIBR DYSPLASIA BONE
	75655	CHONDROECTODERMAL DYSPLASIA
	75656	MULTIPLE EPIPHYSEAL DYSPLASIA
	75659	OTHER OSTEODYSTROPHIES
	75681	ABSENCE OF MUSCLE AND TENDON
	75682	ACCESSORY MUSCLE
	75683	EHLERS-DANLOS SYNDROME
	75689	OTH SPEC ANOM MUSC/TEND/FASC/CT
	7569	UNSPEC ANOM MUSCULOSKELETAL SYS

ACCS CELL
567-568 Other Inflam Musculoskeletal

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
567-568 DIAG INV & MANAGEMENT OTHER INFLAM MUSCULOSKELETAL		
	7260	ADHESIVE CAPSULITIS OF SHOULDER
	72610	DISORD BURSAE/TEND SHOULDER NOS
	72611	CALCIFYING TENDINITIS SHOULDER
	72612	BICIPITAL TENOSYNOVITIS
	72619	OTH SPEC DISORDERS ROTATOR CUFF
	7262	OTH AFFECTIONS SHOULDER REG NEC
	72630	ENTHESOPATHY ELBOW REGION NOS
	72631	MEDIAL EPICONDYLITIS
	72632	LATERAL EPICONDYLITIS
	72633	OLECRANON BURSITIS
	72639	OTHER ENTHESOPATHY ELBOW REGION
	7264	ENTHESOPATHY WRIST AND CARPUS
	7265	ENTHESOPATHY OF HIP REGION
	72660	ENTHESOPATHY OF KNEE UNSPEC
	72661	PES ANSERINUS TENDINITIS/BURSIT
	72662	TIBIAL COLLATERAL LIG BURSITIS
	72663	FIBULAR COLLATERAL LIG BURSITIS
	72664	PATELLAR TENDINITIS
	72665	PREPATELLAR BURSITIS
	72669	OTHER ENTHESOPATHY OF KNEE
	72670	ENTHESOPATHY ANKLE/TARSUS NOS
	72671	ACHILLES BURSITIS OR TENDINITIS
	72672	TIBIALIS TENDINITIS
	72679	OTHER ENTHESOPATHY ANKLE/TARSUS
	7268	OTHER PERIPHERAL ENTHESOPATHIES
	72690	ENTHESOPATHY UNSPECIFIED SITE
	72700	SYNOVITIS AND TENOSYNOVITIS NOS
	72701	SYNOVITIS/TENOSYNOVITIS DIS EC
	72704	RADIAL STYLOID TENOSYNOVITIS
	72705	OTHER TENOSYNOVITIS HAND/WRIST
	72706	TENOSYNOVITIS OF FOOT AND ANKLE
	72709	OTHER SYNOVITIS/TENOSYNOVITIS
	7272	SPEC BURSITIDES OCCUPATION ORIG
	7273	OTHER BURSITIS
	7280	INFECTIVE MYOSITIS
	72811	PROGRESSIVE MYOSITIS OSSIFICANS
	72812	TRAUMATIC MYOSITIS OSSIFICANS
	72881	INTERSTITIAL MYOSITIS
	7294	FASCIITIS UNSPECIFIED
	99666	INFECT/INFLAM INT JOINT PROSTH
	99667	INFECT/INFLAM ORTHO DEV/IMP/GRF
	99669	INFECT/INFLAM OTH DEV/IMPL/GRF
	99762	INFECTION(CHR) AMPUTATION STUMP

ACCS CELL
569 Infectious Musculoskeletal

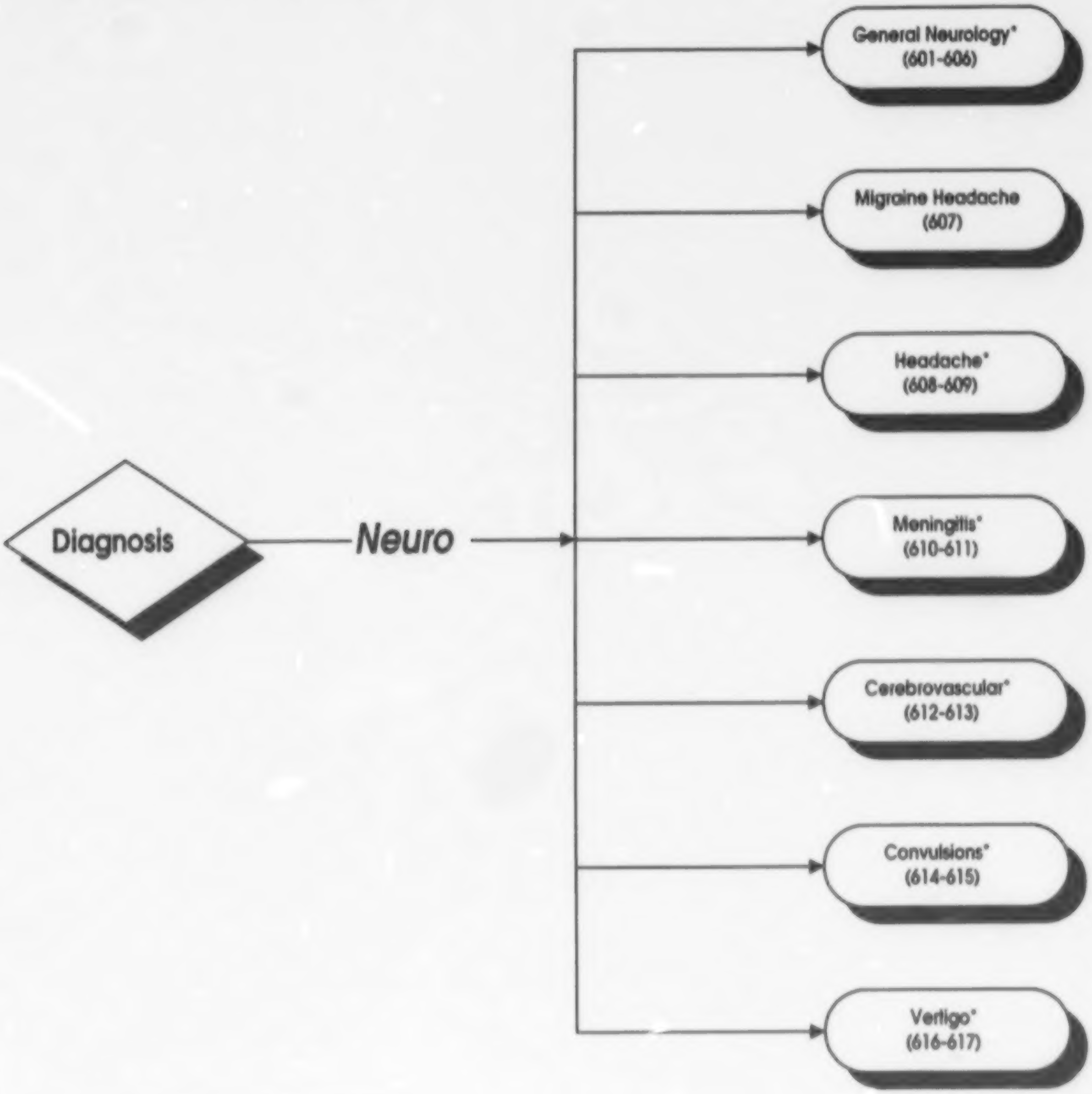
ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
569 INFECTIOUS MUSCULOSKELETAL		
	00323	SALMONELLA ARTHRITIS
	00324	SALMONELLA OSTEOMYELITIS
	01500	TB OF VERTEBRA - UNSPEC EXAM
	01501	TB OF VERTEBRA - NO EXAM
	01502	TB OF VERTEBRA - EXAM UNKNOWN
	01503	TB OF VERTEBRA - MICRO DX
	01504	TB OF VERTEBRA - CULTURE DX
	01505	TB OF VERTEBRA - HISTOLOGY DX
	01506	TB OF VERTEBRA - OTHER TEST
	01510	TUBERCULOSIS HIP - UNSPEC EXAM
	01511	TUBERCULOSIS HIP - NO EXAM
	01512	TUBERCULOSIS HIP - EXAM UNKNOWN
	01513	TUBERCULOSIS HIP - MICRO DX
	01514	TUBERCULOSIS HIP - CULTURE DX
	01515	TUBERCULOSIS HIP - HISTOLOGY DX
	01516	TUBERCULOSIS HIP - OTHER TEST
	01520	TUBERCULOSIS KNEE - UNSPEC EXAM
	01521	TUBERCULOSIS KNEE - NO EXAM
	01522	TUBERCULOSIS KNEE-EXAM UNKNOWN
	01523	TUBERCULOSIS KNEE - MICRO DX
	01524	TUBERCULOSIS KNEE - CULTURE DX
	01525	TUBERCULOSIS KNEE-HISTOLOGY DX
	01526	TUBERCULOSIS KNEE - OTHER TEST
	01550	TB OF LIMB BONES - UNSPEC EXAM
	01551	TB OF LIMB BONES - NO EXAM
	01552	TB OF LIMB BONES - EXAM UNKNOWN
	01553	TB OF LIMB BONES - MICRO DX
	01554	TB OF LIMB BONES - CULTURE DX
	01555	TB OF LIMB BONES - HISTOLOGY DX
	01556	TB OF LIMB BONES - OTHER TEST
	01570	TB OF OTHER BONE - UNSPEC EXAM
	01571	TB OF OTHER BONE - NO EXAM
	01572	TB OF OTHER BONE - EXAM UNKNOWN
	01573	TB OF OTHER BONE - MICRO DX
	01574	TB OF OTHER BONE - CULTURE DX
	01575	TB OF OTHER BONE - HISTOLOGY DX
	01576	TB OF OTHER BONE - OTHER TEST
	01580	TB OF OTHER JOINT - UNSPEC EXAM
	01581	TB OF OTHER JOINT - NO EXAM
	01582	TB OF OTHER JOINT -EXAM UNKNOWN
	01583	TB OF OTHER JOINT - MICRO DX
	01584	TB OF OTHER JOINT - CULTURE DX
	01585	TB OF OTHER JOINT -HISTOLOGY DX
	01586	TB OF OTHER JOINT - OTHER TEST
	01590	TB UNSPEC BONE/JNT -UNSPEC EXAM
	01591	TB UNSPEC BONE/JNT - NO EXAM
	01592	TB UNSPEC BONE/JNT-EXAM UNKNOWN
	01593	TB UNSPEC BONE/JNT - MICRO DX
	01594	TB UNSPEC BONE/JNT - CULTURE DX
	01595	TB UNSPEC BONE/JNT-HISTOLOGY DX
	01596	TB UNSPEC BONE/JNT - OTHER TEST
	03682	MENINGOCOCCAL ARTHROPATHY
	05671	ARTHRITIS DUE TO RUBELLA

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
569 INFECTIOUS MUSCULOSKELETAL		
	0955	SYPHILIS OF BONE
	0956	SYPHILIS OF MUSCLE
	0957	SYPHILIS SYNOVIUM/TENDON/BURSA
	09850	GONOCOCCAL ARTHRITIS
	09851	GC SYNOVITIS AND TENOSYNOVITIS
	09852	GONOCOCCAL BURSITIS
	09853	GONOCOCCAL SPONDYLITIS
	09859	OTH GONOCOCCAL INFECTION JOINT
	0993	REITER'S DISEASE
	1026	YAWS BONE AND JOINT LESIONS
	1373	LATE EFFECTS TB BONES / JOINTS
	71100	PYOGENIC ARTHRITIS SITE UNSPEC
	71101	PYOGENIC ARTHRITIS SHOULDER REG
	71102	PYOGENIC ARTHRITIS UPPER ARM
	71103	PYOGENIC ARTHRITIS FOREARM
	71104	PYOGENIC ARTHRITIS HAND
	71105	PYOGENIC ARTHRITIS PELVIC/THIGH
	71106	PYOGENIC ARTHRITIS LOWER LEG
	71107	PYOGENIC ARTHRITIS ANKLE/FOOT
	71108	PYOGENIC ARTHRITIS OTHER SITES
	71109	PYOGENIC ARTHRITIS MULT SITES
	71110	ARTHRO REITER'S DIS SITE UNSPEC
	71111	ARTHRO REITER'S DIS SHOULDER
	71112	ARTHRO REITER'S DIS UPPER ARM
	71113	ARTHRO REITER'S DIS FOREARM
	71114	ARTHRO REITER'S DISEASE HAND
	71115	ARTHRO REITER'S DIS PELV/THIGH
	71116	ARTHRO REITER'S DIS LOWER LEG
	71117	ARTHRO REITER'S DIS ANKLE/FOOT
	71118	ARTHRO REITER'S DIS OTHER SITES
	71119	ARTHRO REITER'S DIS MULT SITES
	71130	POSTDYSENTERIC ARTHRO SITE NOS
	71131	POSTDYSENTERIC ARTHRO SHOULDER
	71132	POSTDYSENTERIC ARTHRO UPPER ARM
	71133	POSTDYSENTERIC ARTHRO FOREARM
	71134	POSTDYSENTERIC ARTHROPATHY HAND
	71135	POSTDYSENTER ARTHRO PELV/THIGH
	71136	POSTDYSENTERIC ARTHRO LOWER LEG
	71137	POSTDYSENTER ARTHRO ANKLE/FOOT
	71138	POSTDYSENTERIC ARTHRO OTH SITES
	71139	POSTDYSENTERIC ARTHRO MULT SITE
	71140	ARTHRO W OTH BACT DIS SITE NOS
	71141	ARTHRO W OTH BACT DIS SHOULDER
	71142	ARTHRO W OTH BACT DIS UPPER ARM
	71143	ARTHRO W OTH BACT DIS FOREARM
	71144	ARTHRO W OTH BACTERIAL DIS HAND
	71145	ARTHRO OTH BACT DIS PELV/THIGH
	71146	ARTHRO W OTH BACT DIS LOWER LEG
	71147	ARTHRO OTH BACT DIS ANKLE/FOOT
	71148	ARTHRO W OTH BACT DIS OTH SITES
	71149	ARTHRO W OTH BACT DIS MULT SITE
	71150	ARTHRO W OTH VIRAL DIS SITE NOS
	71151	ARTHRO W OTH VIRAL DIS SHOULDER
	71152	ARTHRO W OTH VIRAL DIS UPP ARM
	71153	ARTHRO W OTH VIRAL DIS FOREARM
	71154	ARTHRO W OTH VIRAL DISEASE HAND
	71155	ARTHRO W OTH VIR DIS PELV/THIGH

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
569 INFECTIOUS MUSCULOSKELETAL		
	71156	ARTHRO W OTH VIRAL DIS LOW LEG
	71157	ARTHRO W OTH VIR DIS ANKLE/FOOT
	71158	ARTHRO W OTH VIRAL DIS OTH SITE
	71159	ARTHRO W OTH VIR DIS MULT SITES
	71160	ARTHROPATHY W MYCOSES SITE NOS
	71161	ARTHROPATHY W MYCOSES SHOULDER
	71162	ARTHROPATHY W MYCOSES UPPER ARM
	71163	ARTHROPATHY W MYCOSES FOREARM
	71164	ARTHROPATHY WITH MYCOSES HAND
	71165	ARTHROPTHY W MYCOSES PELV/THIGH
	71166	ARTHROPATHY W MYCOSES LOWER LEG
	71167	ARTHROPTHY W MYCOSES ANKLE/FOOT
	71168	ARTHROPATHY W MYCOSES OTH SITES
	71169	ARTHROPATHY W MYCOSES MULT SITE
	71170	ARTHRO W HELMINTHIASIS SITE NOS
	71171	ARTHRO W HELMINTHIASIS SHOULDER
	71172	ARTHRO W HELMINTHIASIS UPP ARM
	71173	ARTHRO W HELMINTHIASIS FOREARM
	71174	ARTHRO WITH HELMINTHIASIS HAND
	71175	ARTHRO W HELMINTHIAS PELV/THIGH
	71176	ARTHRO W HELMINTHIASIS LOW LEG
	71177	ARTHRO W HELMINTHIAS ANKLE/FOOT
	71178	ARTHRO W HELMINTHIASIS OTH SITE
	71179	ARTHRO W HELMINTHIAS MULT SITES
	71180	ARTHRO OTH INFECT DIS SITE NOS
	71181	ARTHRO OTH INFECT DIS SHOULDER
	71182	ARTHRO W OTH INFECT DIS UPP ARM
	71183	ARTHRO W OTH INFECT DIS FOREARM
	71184	ARTHRO W OTHER INFECT DIS HAND
	71185	ARTHRO W OTH INFECT PELV/THIGH
	71186	ARTHRO W OTH INFECT DIS LOW LEG
	71187	ARTHRO W OTH INFECT ANKLE/FOOT
	71188	ARTHRO OTH INFECT DIS OTH SITES
	71189	ARTHRO OTH INFECT DIS MULT SITE
	71190	INFECT ARTHRITIS NOS SITE NOS
	71191	INFECT ARTHRITIS NOS SHOULDER
	71192	INFECTIVE ARTHRITIS NOS UPP ARM
	71193	INFECTIVE ARTHRITIS NOS FOREARM
	71194	INFECTIVE ARTHRITIS NOS HAND
	71195	INFECT ARTHRITIS NOS PELV/THIGH
	71196	INFECTIVE ARTHRITIS NOS LOW LEG
	71197	INFECT ARTHRITIS NOS ANKLE/FOOT
	71198	INFECT ARTHRITIS NOS OTH SITES
	71199	INFECT ARTHRITIS NOS MULT SITES
	73000	ACUTE OSTEOMYELITIS SITE UNSPEC
	73001	ACUTE OSTEOMYELITIS SHOULER REG
	73002	ACUTE OSTEOMYELITIS UPPER ARM
	73003	ACUTE OSTEOMYELITIS FOREARM
	73004	ACUTE OSTEOMYELITIS HAND
	73005	ACUTE OSTEOMYELITIS PELV/THIGH
	73006	ACUTE OSTEOMYELITIS LOWER LEG
	73007	ACUTE OSTEOMYELITIS ANKLE/FOOT
	73008	ACUTE OSTEOMYELITIS OTHER SITE
	73009	ACUTE OSTEOMYELITIS MULT SITES
	73010	CHRONIC OSTEOMYELITIS SITE NOS
	73011	CHRONIC OSTEOMYELITIS SHOULDER

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
569 INFECTIOUS MUSCULOSKELETAL		
	73012	CHRONIC OSTEOMYELITIS UPPER ARM
	73013	CHRONIC OSTEOMYELITIS FOREARM
	73014	CHRONIC OSTEOMYELITIS HAND
	73015	CHR OSTEOMYELITIS PELVIS/THIGH
	73016	CHRONIC OSTEOMYELITIS LOWER LEG
	73017	CHR OSTEOMYELITIS ANKLE/FOOT
	73018	CHRONIC OSTEOMYELITIS OTH SITES
	73019	CHRONIC OSTEOMYELITIS MULT SITE
	73020	UNSPEC OSTEOMYELITIS SITE NOS
	73021	UNSPEC OSTEOMYELITIS SHOULDER
	73022	UNSPEC OSTEOMYELITIS UPPER ARM
	73023	UNSPEC OSTEOMYELITIS FOREARM
	73024	UNSPEC OSTEOMYELITIS HAND
	73025	UNSPEC OSTEOMYELITIS PELV/THIGH
	73026	UNSPEC OSTEOMYELITIS LOWER LEG
	73027	UNSPEC OSTEOMYELITIS ANKLE/FOOT
	73028	UNSPEC OSTEOMYELITIS OTH SITES
	73029	UNSPEC OSTEOMYELITIS MULT SITES
	73080	OTH INFECT BONE DIS EC SITE NOS
	73081	OTH INFECT BONE DIS EC SHOULDER
	73082	OTH INFECT BONE DIS EC UPP ARM
	73083	OTH INFECT BONE DIS EC FOREARM
	73084	OTH INFECTIONS BONE DIS EC HAND
	73085	OTH INFECT BONE DIS EC PELVIS
	73086	OTH INFECT BONE DIS EC LOW LEG
	73087	OTH INFECT BONE DIS EC ANKLE/FT
	73088	OTH INFECT BONE DIS EC OTH SITE
	73089	OTH INFCT BONE DIS EC MULT SITE
	73090	UNSPEC INFECTION BONE SITE NOS
	73091	UNSPEC INFECTION BONE SHOULDER
	73092	UNSPEC INFECTION BONE UPPER ARM
	73093	UNSPEC INFECTION BONE FOREARM
	73094	UNSPEC INFECTION BONE HAND
	73095	UNSPEC INFECT BONE PELVIS/THIGH
	73096	UNSPEC INFECTION BONE LOWER LEG
	73097	UNSPEC INFECT BONE ANKLE/FOOT
	73098	UNSPEC INFECTION BONE OTH SITES
	73099	UNSPEC INFECTION BONE MULT SITE

Neurology Clinical Grouping


Diagnosis
Neuro
General Neurology*
(601-606)
Migraine Headache
(607)
Headache*
(608-609)
Meningitis*
(610-611)
Cerebrovascular*
(612-613)
Convulsions*
(614-615)
Vertigo*
(616-617)

*Clinical Group broken down further - see following pages.

ACCS Grouper
04/96

ACCS CELL
601-606 General Neurology

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
601- 606 DIAG INV & MANAGEMENT GENERAL NEUROLOGY		
	01310	TBRCLOMA MENINGES-UNSPEC EXAM
	01311	TBRCLOMA MENINGES - NO EXAM
	01312	TBRCLOMA MENINGES-EXAM UNKNOWN
	01313	TBRCLOMA MENINGES - MICRO DX
	01314	TBRCLOMA MENINGES - CULTURE DX
	01315	TBRCLOMA MENINGES-HISTOLOGY DX
	01316	TBRCLOMA MENINGES - OTHER TEST
	01320	TUBERCULOMA BRAIN - UNSPEC EXAM
	01321	TUBERCULOMA BRAIN - NO EXAM
	01322	TUBERCULOMA BRAIN-EXAM UNKNOWN
	01323	TUBERCULOMA BRAIN - MICRO DX
	01324	TUBERCULOMA BRAIN - CULTURE DX
	01325	TUBERCULOMA BRAIN-HISTOLOGY DX
	01326	TUBERCULOMA BRAIN - OTHER TEST
	01330	TB ABSCESS BRAIN - UNSPEC EXAM
	01331	TB ABSCESS BRAIN - NO EXAM
	01332	TB ABSCESS BRAIN - EXAM UNKNOWN
	01333	TB ABSCESS BRAIN - MICRO DX
	01334	TB ABSCESS BRAIN - CULTURE DX
	01335	TB ABSCESS BRAIN - HISTOLOGY DX
	01336	TB ABSCESS BRAIN - OTHER TEST
	01340	TBRCLOMA SP CORD - UNSPEC EXAM
	01341	TBRCLOMA SP CORD - NO EXAM
	01342	TBRCLOMA SP CORD - EXAM UNKNOWN
	01343	TBRCLOMA SP CORD - MICRO DX
	01344	TBRCLOMA SP CORD - CULTURE DX
	01345	TBRCLOMA SP CORD - HISTOLOGY DX
	01346	TBRCLOMA SP CORD - OTHER TEST
	01350	TB ABSCESS SP CORD-UNSPEC EXAM
	01351	TB ABSCESS SP CORD - NO EXAM
	01352	TB ABSCESS SP CORD-EXAM UNKNOWN
	01353	TB ABSCESS SP CORD - MICRO DX
	01354	TB ABSCESS SP CORD - CULTURE DX
	01355	TB ABSCESS SP CORD-HISTOLOGY DX
	01356	TB ABSCESS SP CORD - OTHER TEST
	01380	OTHER SPEC TB CNS - UNSPEC EXAM
	01381	OTHER SPEC TB CNS - NO EXAM
	01382	OTHER SPEC TB CNS-EXAM UNKNOWN
	01383	OTHER SPEC TB CNS - MICRO DX
	01384	OTHER SPEC TB CNS - CULTURE DX
	01385	OTHER SPEC TB CNS-HISTOLOGY DX
	01386	OTHER SPEC TB CNS - OTHER TEST
	01390	UNSPEC TB CNS - UNSPEC EXAM
	01391	UNSPEC TB CNS - NO EXAM
	01392	UNSPEC TB CNS - EXAM UNKNOWN
	01393	UNSPEC TB CNS - MICRO DX
	01394	UNSPEC TB CNS - CULTURE DX
	01395	UNSPEC TB CNS - HISTOLOGY DX
	01396	UNSPEC TB CNS - OTHER TEST
	04500	AC BULBAR PARALYT POLIO - NOS
	04501	AC BULBAR PARALYT POLIO -TYPE 1
	04502	AC BULBAR PARALYT POLIO -TYPE 2

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
601- 606 DIAG INV & MANAGEMENT GENERAL NEUROLOGY		
	04503	AC BULBAR PARALYT POLIO -TYPE 3
	04510	AC POLIO W OTH PARALYSIS - NOS
	04511	AC POLIO W OTH PARALYSIS-TYPE 1
	04512	AC POLIO W OTH PARALYSIS-TYPE 2
	04513	AC POLIO W OTH PARALYSIS-TYPE 3
	04520	AC NONPARALYTIC POLIO - NOS
	04521	AC NONPARALYTIC POLIO - TYPE 1
	04522	AC NONPARALYTIC POLIO - TYPE 2
	04523	AC NONPARALYTIC POLIO - TYPE 3
	04590	AC POLIOMYELITIS UNSPEC - NOS
	04591	AC POLIOMYELITIS UNSPEC -TYPE 1
	04592	AC POLIOMYELITIS UNSPEC -TYPE 2
	04593	AC POLIOMYELITIS UNSPEC -TYPE 3
	05310	HERP ZOSTER W UNSPEC NERV COMPL
	05311	GENICULATE HERPES ZOSTER
	05312	POSTHERP TRIGEMINAL NEURALGIA
	05313	POSTHERPETIC POLYNEUROPATHY
	05319	HERPES ZOSTER W OTH NERV COMPL
	05600	RUBELLA W UNSPEC NEURO COMPL
	05609	RUBELLA W OTH NEUROLOGIC COMPL
	0662	VENEZUELAN EQUINE FEVER
	071	RABIES
	07272	MUMPS POLYNEUROPATHY
	09040	JUVENILE NEUROSYPHILIS UNSPEC
	09049	OTHER JUVENILE NEUROSYPHILIS
	0940	TABES DORSALIS
	0941	GENERAL PARESIS
	0943	ASYMPTOMATIC NEUROSYPHILIS
	09482	SYPHILITIC PARKINSONISM
	09485	SYPHILITIC RETROBULBAR NEURITIS
	09487	SYPH RUPTURED CEREBRAL ANEURYSM
	09489	OTHER SPECIFIED NEUROSYPHILIS
	0949	UNSPECIFIED NEUROSYPHILIS
	10089	OTHER SPEC LEPTOSPIRAL INFECT
	11284	CANDIDAL ESOPHAGITIS
	11285	CANDIDAL ENTERITIS
	1371	LATE EFFECTS CNS TUBERCULOSIS
	138	LATE EFFECTS AC POLIOMYELITIS
	2250	BENIGN NEOPLASM OF BRAIN
	2251	BENIGN NEOPLASM CRANIAL NERVES
	2252	BEN NEOPLASM CEREBRAL MENINGES
	2253	BENIGN NEOPLASM OF SPINAL CORD
	2254	BENIGN NEOPLASM SPINAL MENINGES
	2258	BEN NEO OTH SPEC NERVOUS SYSTEM
	2259	BEN NEO NERVOUS SYS PART UNSPEC
	2274	BENIGN NEOPLASM OF PINEAL GLAND
	2275	BENIGN NEOPLASM OF CAROTID BODY
	2276	BEN NEO AORTIC BODY/PARAGANGLIA
	22802	HEMANGIOMA INTRACRANIAL STRUCT
	25060	DIABETES WITH NEURO MAN TYPE II
	25061	DIABETES WITH NEURO MAN TYPE I
	3240	INTRACRANIAL ABSCESS
	3241	INTRASPINAL ABSCESS
	3249	INTRACRAN/INTRASPIN ABSCESS NOS
	326	LATE EFF INTRACRAN ABSC/INFECT
	3300	LEUKODYSTROPHY
	3301	CEREBRAL LIPIDOSES

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
601- 606 DIAG INV & MANAGEMENT GENERAL NEUROLOGY		
	3302	CEREBRAL DEGEN IN GEN LIPIDOSES
	3303	CEREB DEGEN CHILD IN OTH DIS EC
	3308	OTH CEREBRAL DEGEN IN CHILDHOOD
	3309	UNSPEC CEREBRAL DEGEN CHILDHOOD
	3310	ALZHEIMER'S DISEASE
	3311	PICK'S DISEASE
	3312	SENILE DEGENERATION OF BRAIN
	3313	COMMUNICATING HYDROCEPHALUS
	3314	OBSTRUCTIVE HYDROCEPHALUS
	3317	CEREBRAL DEGEN IN DISEASES EC
	33181	REYE'S SYNDROME
	33189	OTHER CEREBRAL DEGENERATION
	3319	CEREBRAL DEGENERATION UNSPEC
	3320	PARALYSIS AGITANS
	3321	SECONDARY PARKINSONISM
	3330	OTH DEGEN DISEASE BASAL GANGLIA
	3331	ESSENTIAL/OTH SPEC FORMS TREMOR
	3332	MYOCLONUS
	3333	TICS OF ORGANIC ORIGIN
	3334	HUNTINGTON'S CHOREA
	3335	OTHER CHOREAS
	3336	IDIOPATHIC TORSION DYSTONIA
	3337	SYMPTOMATIC TORSION DYSTONIA
	33382	OROFACIAL DYSKINESIA
	33383	SPASMODIC TORTICOLLIS
	33384	ORGANIC WRITERS' CRAMP
	33389	OTH FRAGMENTS TORSION DYSTONIA
	33390	UNSPEC EXTRAPYR DIS/MOVE DISORD
	33391	STIFF-MAN SYNDROME
	33392	NEUROLEPTIC MALIGNANT SYNDROME
	33393	BENIGN SHUDDERING ATTACKS
	33399	OTH/UNSPEC EXTRAPYR/MOVE DISORD
	3340	FRIEDREICH'S ATAXIA
	3341	HEREDITARY SPASTIC PARAPLEGIA
	3342	PRIMARY CEREBELLAR DEGENERATION
	3343	OTHER CEREBELLAR ATAXIA
	3344	CEREBELLAR ATAXIA IN DISEASE EC
	3348	OTHER SPINOCEREBELLAR DISEASES
	3349	UNSPEC SPINOCEREBELLAR DISEASE
	3350	WERDNIG-HOFFMANN DISEASE
	33510	SPINAL MUSCULAR ATROPHY UNSPEC
	33511	KUGELBERG-WELANDER DISEASE
	33519	OTHER SPINAL MUSCULAR ATROPHY
	33520	AMYOTROPHIC LATERAL SCLEROSIS
	33521	PROGRESSIVE MUSCULAR ATROPHY
	33522	PROGRESSIVE BULBAR PALSY
	33523	PSEUDOBULBAR PALSY
	33524	PRIMARY LATERAL SCLEROSIS
	33529	OTHER MOTOR NEURON DISEASE
	3358	OTH ANTERIOR HORN CELL DISEASES
	3359	UNSPEC ANTERIOR HORN CELL DIS
	3360	SYRINGOMYELIA/SYRINGOBULBIA
	3361	VASCULAR MYELOPATHIES
	3362	SUBAC COMBIN DEGEN SPINAL CORD
	3363	MYELOPATHY IN OTHER DISEASES EC
	3368	OTHER MYELOPATHY

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
601- 606 DIAG INV & MANAGEMENT GENERAL NEUROLOGY		
	3369	UNSPEC DISEASE OF SPINAL CORD
	3370	IDIO PERIPH AUTONOM NEUROPATHY
	3371	PERIPH AUTONOM NEUROPATH DIS EC
	33720	UNS REFLEX SYMPATHETIC DYSTROPH
	33721	REFLEX SYMPATH DYST UPPER LIMB
	33722	REFLEX SYMPATH DYST LOWER LIMB
	33729	REFLEX SYMPATHETIC DYS OTH SITE
	3373	AUTONOMIC DYSREFLEXIA
	3379	UNSPEC DISORD AUTONOM NERV SYS
	340	MULTIPLE SCLEROSIS
	3410	NEUROMYELITIS OPTICA
	3411	SCHILDER'S DISEASE
	3418	OTH DEMYELINATING DISEASES CNS
	3419	UNSPEC DEMYELINATING DIS CNS
	34200	FLACCID HEMIPLEGIA AFF UNS SIDE
	34201	FLACCID HEMIPLEGIA AFF DOM SIDE
	34202	FLACCID HEMIPLEG AFF NONDOM SID
	34210	SPASTIC HEMIPLEGIA AFF UNS SIDE
	34211	SPASTIC HEMIPLEGIA AFF DOM SIDE
	34212	SPASTIC HEMIPLEG AFF NONDOM SID
	34280	OTH SPEC HEMIPLEGIA AFF UNS SID
	34281	OTH SPEC HEMIPLEGIA AFF DOM SDE
	34282	OTH SPEC HEMIPLEG AFF NONDOM SI
	34290	UNS HEMIPLEGIA AFFECT UNS SIDE
	34291	UNS HEMIPLEGIA AFFECT DOM SIDE
	34292	UNS HEMIPLEGIA AFF NONDOM SIDE
	3430	DIPLEGIC INFANTILE CEREB PALSY
	3431	HEMIPLEG INFANTILE CEREB PALSY
	3432	QUADRIPLEG INFANT CEREB PALSY
	3433	MONOPLEGIC INFANT CEREB PALSY
	3434	INFANTILE HEMIPLEGIA
	3438	OTH SPEC INFANTILE CEREB PALSY
	3439	UNSPEC INFANTILE CEREBRAL PALSY
	34400	QUADRIPLEGIA UNSPECIFIED
	34401	QUADRIPLEGIA C1-C4 COMPLETE
	34402	QUADRIPLEGIA C1-C4 INCOMPLETE
	34403	QUADRIPLEGIA C5-C7 COMPLETE
	34404	QUADRIPLEGIA C5-C7 INCOMPLETE
	34409	OTHER QUADRIPLEGIA
	3441	PARAPLEGIA
	3442	DIPLEGIA OF UPPER LIMBS
	34430	MONOPLEGIA LOW LIMB AFF UNS SID
	34431	MONOPLEGIA LOW LIMB AFF DOM SID
	34432	MONOPLEG LOW LIMB AFF NONDOM SI
	34440	MONOPLEGIA UPP LIMB AFF UNS SID
	34441	MONOPLEGIA UPP LIMB AFF DOM SID
	34442	MONOPLEG UPP LIMB AFF NONDOM SI
	3445	UNSPECIFIED MONOPLEGIA
	34460	CAUDA EQUINA NO NEUROGENIC BLAD
	34481	LOCKED-IN STATE
	34489	OTHER SPEC PARALYTIC SYNDROME
	3449	UNSPECIFIED PARALYSIS
	347	CATAPLEXY AND NARCOLEPSY
	3480	CEREBRAL CYSTS
	3481	ANOXIC BRAIN DAMAGE
	3482	BEN INTRACRANIAL HYPERTENSION

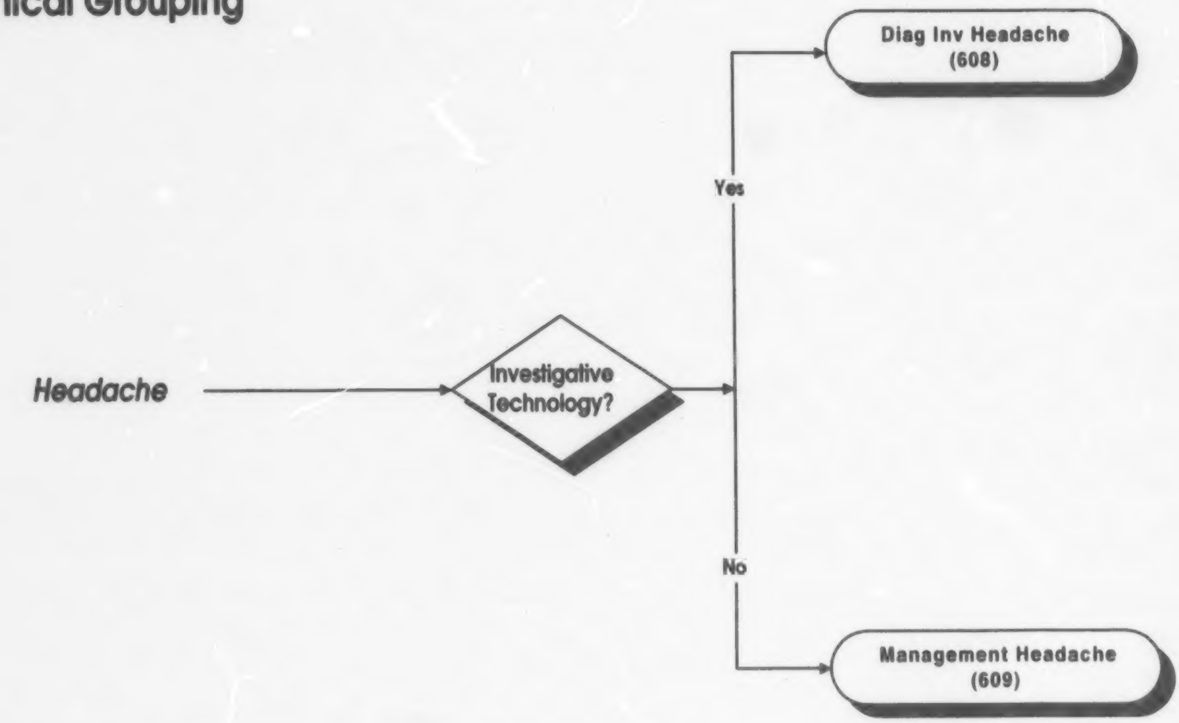
ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
601- 606 DIAG INV & MANAGEMENT GENERAL NEUROLOGY		
	3484	COMPRESSION OF BRAIN
	3485	CEREBRAL EDEMA
	3490	REACTION SPINAL/LUMBAR PUNCTURE
	3491	NERVOUS SYS COMPL SURG IMPLANT
	3492	DISORDERS OF MENINGES NEC
	34981	CEREBROSPINAL FLUID RHINORRHEA
	34982	TOXIC ENCEPHALOPATHY
	34989	OTH SPEC DISORD NERVOUS SYSTEM
	3499	UNSPEC DISORD OF NERVOUS SYSTEM
	3510	BELL'S PALSY
	3511	GENICULATE GANGLIONITIS
	3518	OTHER FACIAL NERVE DISORDERS
	3519	UNSPEC FACIAL NERVE DISORDER
	3520	DISORDERS OF OLFACTORY NERVE
	3521	GLOSSOPHARYNGEAL NEURALGIA
	3522	OTH DISORD GLOSSOPHARYNG NERVE
	3523	DISORDERS PNEUMOGASTRIC NERVE
	3524	DISORDERS OF ACCESSORY NERVE
	3525	DISORDERS OF HYPOGLOSSAL NERVE
	3526	MULTIPLE CRANIAL NERVE PALSIES
	3529	UNSPEC DISORDER CRANIAL NERVES
	3530	BRACHIAL PLEXUS LESIONS
	3531	LUMBOSACRAL PLEXUS LESIONS
	3532	CERVICAL ROOT LESIONS NEC
	3533	THORACIC ROOT LESIONS NEC
	3534	LUMBOSACRAL ROOT LESIONS NEC
	3535	NEURALGIC AMYOTROPHY
	3536	PHANTOM LIMB (SYNDROME)
	3538	OTH NERVE ROOT/PLEXUS DISORDERS
	3539	UNSPEC NERVE ROOT/PLEXUS DISORD
	3540	CARPAL TUNNEL SYNDROME
	3541	OTHER LESION OF MEDIAN NERVE
	3542	LESION OF ULNAR NERVE
	3543	LESION OF RADIAL NERVE
	3544	CAUSALGIA OF UPPER LIMB
	3545	MONONEURITIS MULTIPLEX
	3548	OTHER MONONEURITIS UPPER LIMB
	3549	UNSPEC MONONEURITIS UPPER LIMB
	3550	LESION OF SCIATIC NERVE
	3551	MERALGIA PARESTHETICA
	3552	OTHER LESION OF FEMORAL NERVE
	3553	LESION LATERAL POPLITEAL NERVE
	3554	LESION MEDIAL POPLITEAL NERVE
	3555	TARSAL TUNNEL SYNDROME
	3556	LESION OF PLANTAR NERVE
	35571	CAUSALGIA OF LOWER LIMB
	35579	OTHER MONONEURITIS LOWER LIMB
	3558	UNSPEC MONONEURITIS LOWER LIMB
	3559	MONONEURITIS UNSPECIFIED SITE
	3560	HEREDITARY PERIPH NEUROPATHY
	3561	PERONEAL MUSCULAR ATROPHY
	3562	HEREDITARY SENSORY NEUROPATHY
	3563	REFSUM'S DISEASE
	3564	IDIOPROGRESSIVE POLYNEUROPATHY
	3568	OTHSPEC IDIO PERIPH NEUROPATHY
	3569	HERED/IDIO PERIPH NEUROPTHY NOS

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
601- 606 DIAG INV & MANAGEMENT GENERAL NEUROLOGY		
	3570	ACUTE INFECTIVE POLYNEURITIS
	3571	POLYNEUROPATHY COLLAGN VASC DIS
	3572	POLYNEUROPATHY IN DIABETES
	3573	POLYNEUROPATHY IN MALIGNANT DIS
	3574	POLYNEUROPATHY IN OTHER DIS EC
	3575	ALCOHOLIC POLYNEUROPATHY
	3576	POLYNEUROPATHY DUE TO DRUGS
	3577	POLYNEUROPATHY OTH TOXIC AGENTS
	3578	OTHER INFLAM/TOXIC NEUROPATHY
	3579	UNSPEC INFLAM/TOXIC NEUROPATHY
	3580	MYASTHENIA GRAVIS
	3581	MYASTHENIC SYNDROMES IN DIS EC
	3582	TOXIC MYONEURAL DISORDERS
	3588	OTHER SPEC MYONEURAL DISORDERS
	3589	UNSPECIFIED MYONEURAL DISORDER
	3590	CONGEN HERED MUSCULAR DYSTROPHY
	3591	HERED PROG MUSCULAR DYSTROPHY
	3592	MYOTONIC DISORDERS
	3593	FAMILIAL PERIODIC PARALYSIS
	3594	TOXIC MYOPATHY
	3595	MYOPATHY ENDOCRINE DISEASES EC
	3596	SYMPT INFLAM MYOPATHY IN DIS EC
	3598	OTHER MYOPATHIES
	3599	MYOPATHY UNSPECIFIED
	37704	FOSTER-KENNEDY SYNDROME
	37710	OPTIC ATROPHY UNSPECIFIED
	37711	PRIMARY OPTIC ATROPHY
	37712	POSTINFLAMMATORY OPTIC ATROPHY
	37713	OPTIC ATROPHY W RETINAL DYST
	37714	GLAUCOMATOUS ATROPHY OPTIC DISC
	37715	PARTIAL OPTIC ATROPHY
	37716	HEREDITARY OPTIC ATROPHY
	37751	DISORD OPTIC CHIASM PIT NEO/DIS
	37752	DISORD OPTIC CHIASM W OTH NEO
	37753	DISORD OPTIC CHIASM VASC DISORD
	37754	DISORD OPTIC CHIASM INFLAM DIS
	37761	DISORD OTH VIS PATH W NEOPLASMS
	37762	DISORD OTH VIS PATH VASC DISORD
	37763	DISORD OTH VIS PATH INFLAM DIS
	37771	DISORD VIS CORTEX W NEOPLASMS
	37772	DISORD VIS CORTEX W VASC DISORD
	37773	DISORD VIS CORTEX W INFLAM DIS
	37775	CORTICAL BLINDNESS
	3779	UNSPEC DISORD OPT NRV/VIS PATH
	37886	INTERNUCLEAR OPHTHALMOPLEGIA
	38861	CEREBROSPINAL FLUID OTORRHEA
	7232	CERVICOCRANIAL SYNDROME
	7233	CERVICOBRACHIAL SYND (DIFFUSE)
	7234	BRACHIAL NEURIT/RADICULITIS NOS
	7292	NEURALGIA/NEURITIS/RADIC NOS
	7400	ANENCEPHALUS
	7401	CRANIORACHISCHISIS
	7402	INIENCEPHALY
	74100	SPINA BIFIDA W HYDROCEPH UNSPEC
	74101	SPINA BIFIDA W HYDROCEPH CERV
	74102	SPINA BIFIDA W HYDROCEPH DORSAL

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
601- 606 DIAG INV & MANAGEMENT GENERAL NEUROLOGY		
	74103	SPINA BIFIDA W HYDROCEPH LUMBAR
	74190	SPINA BIFIDA NO HYDROCEPH NOS
	74191	SPINA BIFIDA NO HYDROCEPH CERV
	74192	SPINA BIFIDA NO HYDROCEPH DORSL
	74193	SPINA BIFIDA NO HYDROCEPH LUMBR
	7420	ENCEPHALOCELE
	7421	MICROCEPHALUS
	7422	REDUCTION DEFORMITIES OF BRAIN
	7423	CONGENITAL HYDROCEPHALUS
	7424	OTHER SPECIFIED ANOMALIES BRAIN
	74251	DIASTEMATOMYELIA
	74253	HYDROMYELIA
	74259	OTH SPEC ANOMALIES SPINAL CORD
	7428	OTH SPEC ANOMALIES NERVOUS SYS
	7429	ANOM BRAIN/SPINAL/NERV SYS NOS
	75617	SPINA BIFIDA OCCULTA
	7580	DOWN'S SYNDROME
	7581	PATAU'S SYNDROME
	7582	EDWARDS' SYNDROME
	7583	AUTOSOMAL DELETION SYNDROMES
	7584	BALANCED AUTOSOMAL TRANSLOCATN
	7585	OTH COND D/T AUTOSOMAL ANOMALY
	7595	TUBEROUS SCLEROSIS
	78003	PERSISTENT VEGETATIVE STATE
	78009	OTHER ALTERATION CONSCIOUSNESS
	7801	HALLUCINATIONS
	78050	SLEEP DISTURBANCE UNSPECIFIED
	78051	INSOMNIA WITH SLEEP APNEA
	78052	OTHER INSOMNIA
	78053	HYPERSOMNIA WITH SLEEP APNEA
	78054	OTHER HYPERSOMNIA
	78055	DISRUPT 24 HR SLEEP-WAKE CYCLE
	78056	DYSFUNCT SLEEP STAGES/AROUSAL
	78057	OTHER & UNSPECIFIED SLEEP APNEA
	78059	OTHER SLEEP DISTURBANCES
	7810	ABNORMAL INVOLUNTARY MOVEMENTS
	7811	DISTURB SENSATION SMELL/TASTE
	7812	ABNORMALITY OF GAIT
	7813	LACK OF COORDINATION
	7814	TRANSIENT PARALYSIS OF LIMB
	7815	CLUBBING OF FINGERS
	7818	NEUROLOGIC NEGLECT SYNDROME
	7819	OTH SYMPT NERV/MUSCULOSKEL SYS
	78460	SYMBOLIC DYSFUNCTION UNSPEC
	78461	ALEXIA AND DYSLEXIA
	78469	OTHER SYMBOLIC DYSFUNCTION
	7903	EXCESSIVE BLOOD LEVEL ALCOHOL
	797	SENILITY NO MENTION PSYCHOSIS
	9962	MECH COMPL NERV DEV/IMPL/GRAFT
	99663	INFECT/INFLAM NERV DEV/IMPL/GRF
	99675	OTH COMPL NERV SYS DEV/IMPL/GRF
	99700	NERVOUS SYSTEM COMPL UNSPECIFIED
	99701	CENTRAL NERVOUS SYSTEM COMPLICATIO
	99702	IATROGENIC CV INFARCT OR HEMORRHAG
	99709	OTHER NERVOUS SYSTEM COMPLICATION
	V482	MECH/MOTOR PROBLEMS WITH HEAD

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
601- 606 DIAG INV & MANAGEMENT GENERAL NEUROLOGY		
	V483	MECH/MOTOR PROBLEM W NECK/TRUNK
	V484	SENSORY PROBLEM WITH HEAD
	V485	SENSORY PROBLEM WITH NECK/TRUNK
	V492	MOTOR PROBLEMS WITH LIMBS
	V493	SENSORY PROBLEMS WITH LIMBS
	V5301	FITTING AND ADJUSTMENT OF CEREBRAL VENTRICULAR (COMMUNICATING) SHUNT
	V5302	NEUROPACEMAKER (BRAIN) (PERIPHERAL NERVE) (SPINAL CORD)
	V5309	FITTING AND ADUST OF OTHER DEVICES RELATED TO NERVOUS SYSTEM AND SPECIAL SENSES

Neurology
Clinical Grouping


Headache
Investigative Technology?
Yes
Diag Inv Headache (608)
No
Management Headache (609)

ACCS Grouper
04/96

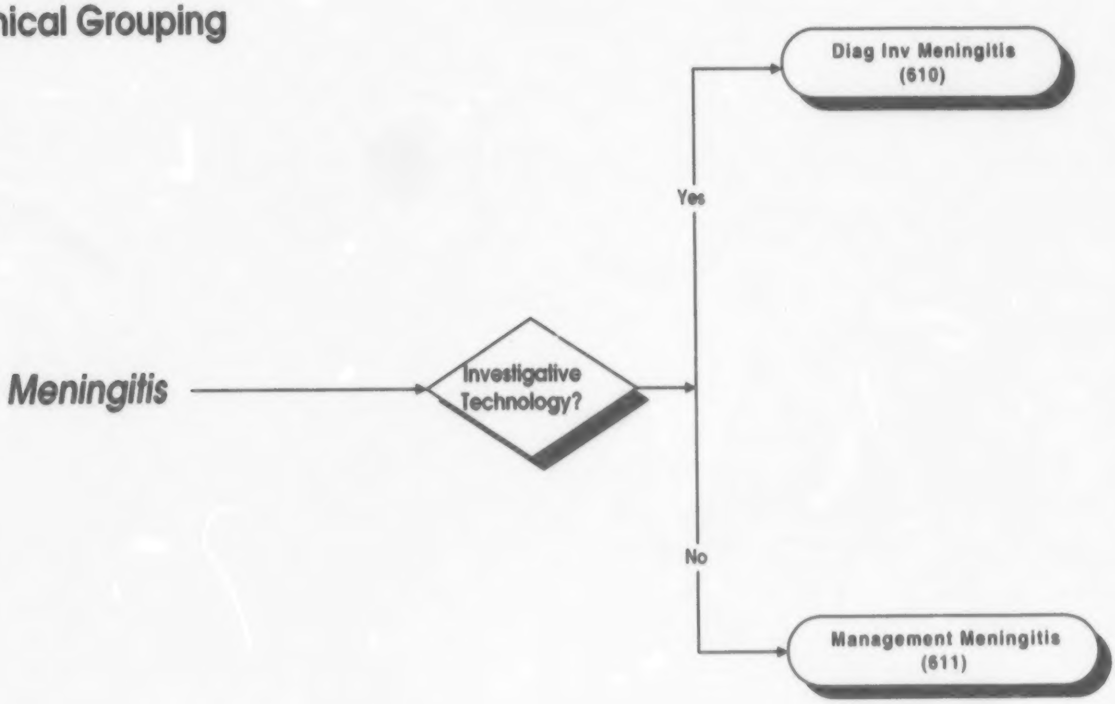
ACCS CELL
607 Migraine Headache

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
607 MIGRAINE HEADACHE		
	34600	CLASSICAL MIGRAINE NO INTRACT
	34601	CLASSICAL MIGRAINE W INTRACT
	34610	COMMON MIGRAINE NO INTRACT
	34611	COMMON MIGRAINE W INTRACT
	34620	VARIANTS OF MIGRAINE NO INTRACT
	34621	VARIANTS OF MIGRAINE W INTRACT
	34680	OTHER FORMS MIGRAINE NO INTRACT
	34681	OTHER FORMS MIGRAINE W INTRACT
	34690	UNSPECIFIED MIGRAINE NO INTRACT
	34691	UNSPECIFIED MIGRAINE W INTRACT

ACCS CELL
608-609 Headache

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
608-609 DIAG INV & MANAGEMENT HEADACHE		
	30781	TENSION HEADACHE
	3501	TRIGEMINAL NEURALGIA
	3502	ATYPICAL FACE PAIN
	3508	OTH SPEC TRIGEMINAL NERV DISORD
	3509	UNSPEC TRIGEMINAL NERVE DISORD
	7840	HEADACHE
	7843	APHASIA

Neurology
Clinical Grouping


Meningitis
Investigative Technology?
Yes
Diag Inv Meningitis (610)
No
Management Meningitis (611)

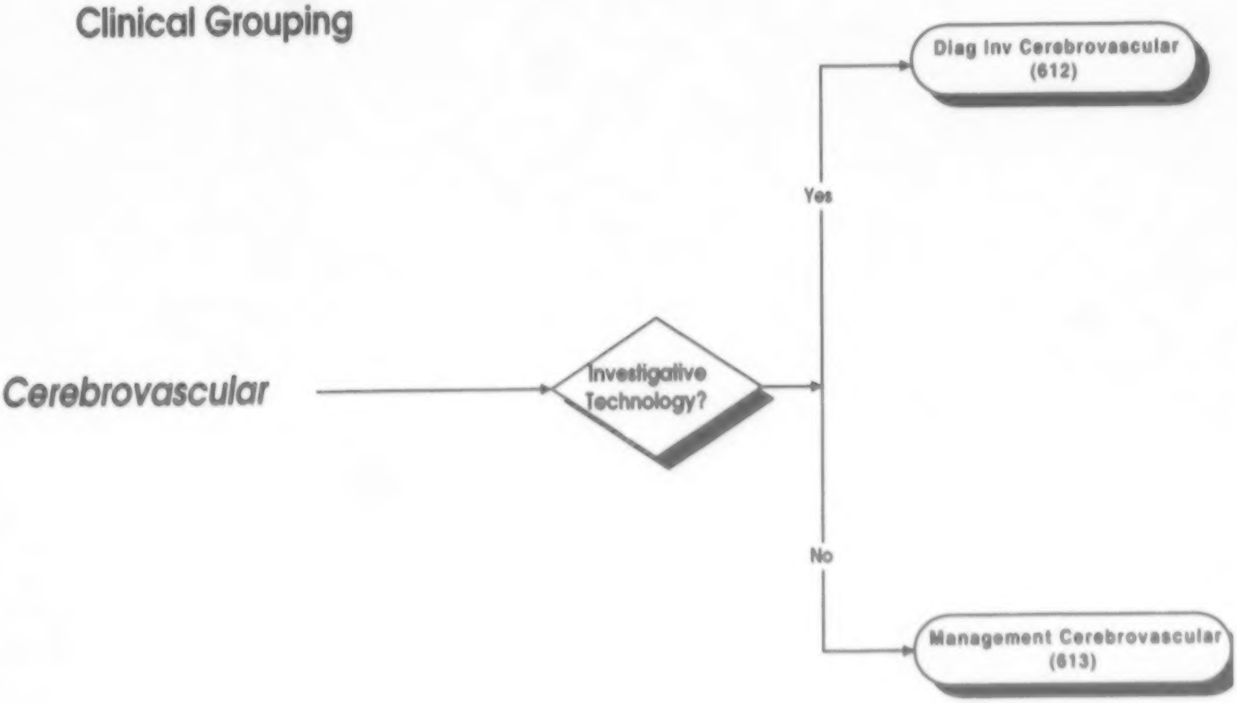
ACCS Grouper
04/96

ACCS CELL
610-611 Meningitis

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
610-611 DIAG INV & MANAGEMENT MENINGITIS		
	00321	SALMONELLA MENINGITIS
	01300	TB MENINGITIS - UNSPEC EXAM
	01301	TB MENINGITIS - NO EXAM
	01302	TB MENINGITIS - EXAM UNKNOWN
	01303	TB MENINGITIS - MICRO DX
	01304	TB MENINGITIS - CULTURE DX
	01305	TB MENINGITIS - HISTOLOGY DX
	01306	TB MENINGITIS - OTHER TEST
	01360	TB ENCEPH/MYELITIS-UNSPEC EXAM
	01361	TB ENCEPH/MYELITIS - NO EXAM
	01362	TB ENCEPH/MYELITIS-EXAM UNKNOWN
	01363	TB ENCEPH/MYELITIS - MICRO DX
	01364	TB ENCEPH/MYELITIS - CULTURE DX
	01365	TB ENCEPH/MYELITIS-HISTOLOGY DX
	01366	TB ENCEPH/MYELITIS - OTHER TEST
	0360	MENINGOCOCCAL MENINGITIS
	0361	MENINGOCOCCAL ENCEPHALITIS
	0460	KURU
	0461	JAKOB-CREUTZFELDT DISEASE
	0462	SUBAC SCLEROS PANENCEPHALITIS
	0463	PROG MULTIF LEUKOENCEPHALOPATHY
	0468	OTH SPEC SLOW VIRUS INFECT CNS
	0469	UNSPEC SLOW VIRUS INFECT OF CNS
	0470	MENINGITIS D/T COXSACKIE VIRUS
	0471	MENINGITIS DUE TO ECHO VIRUS
	0478	MENINGITIS D/T OTH SPEC VIRUS
	0479	MENINGITIS D/T UNSPEC VIRUS
	048	OTH ENTEROVIRUS DISEASES OF CNS
	0490	LYMPHOCYTIC CHORIOMENINGITIS
	0491	MENINGITIS DUE TO ADENOVIRUS
	0498	OTH NON-ARTHROPOD-BORNE VIR CNS
	0499	UNSPEC NON-ARTHRO-BORNE VIR CNS
	0520	POSTVARICELLA ENCEPHALITIS
	0530	HERPES ZOSTER WITH MENINGITIS
	0543	HERPETIC MENINGOENCEPHALITIS
	05472	HERPES SIMPLEX MENINGITIS
	0550	POSTMEASLES ENCEPHALITIS
	05601	ENCEPHALOMYELITIS D/T RUBELLA
	0620	JAPANESE ENCEPHALITIS
	0621	WESTERN EQUINE ENCEPHALITIS
	0622	EASTERN EQUINE ENCEPHALITIS
	0623	STLOUIS ENCEPHALITIS
	0624	AUSTRALIAN ENCEPHALITIS
	0625	CALIFORNIA VIRUS ENCEPHALITIS
	0628	OTH SPEC MOSQ-BORNE VIR ENCEPH
	0629	UNSPEC MOSQ-BORNE VIRAL ENCEPH
	0630	RUSSIAN SPRING-SUMMER ENCEPH
	0631	LOUPING ILL
	0632	CENTRAL EUROPEAN ENCEPHALITIS
	0638	OTH SPEC TICK-BORNE VIR ENCEPH
	0639	UNSPEC TICK-BORNE VIR ENCEPH
	064	VIR ENCEPH OTH/UNSPEC ARTHROPOD

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
610-611 DIAG INV & MANAGEMENT MENINGITIS		
	0721	MUMPS MENINGITIS
	0722	MUMPS ENCEPHALITIS
	09041	CONGEN SYPHILITIC ENCEPHALITIS
	09042	CONGEN SYPHILITIC MENINGITIS
	09181	AC SYPH MENINGITIS (SECONDARY)
	0942	SYPHILITIC MENINGITIS
	09481	SYPHILITIC ENCEPHALITIS
	09882	GONOCOCCAL MENINGITIS
	10081	LEPTOSPIRAL MENINGITIS(ASEPTIC)
	11283	CANDIDAL MENINGITIS
	1142	COCCIDIOIDAL MENINGITIS
	11501	HISTOPLASMA CAPSULATUM MENING
	11511	HISTOPLASMA DUBOISII MENINGITIS
	11591	UNSPEC HISTOPLASMOSIS MENING
	1300	TOXOPLASMOSIS MENINGOENCEPHALIT
	1390	LATE EFFECTS VIRAL ENCEPHALITIS
	3200	HEMOPHILUS MENINGITIS
	3201	PNEUMOCOCCAL MENINGITIS
	3202	STREPTOCOCCAL MENINGITIS
	3203	STAPHYLOCOCCAL MENINGITIS
	3207	MENINGITIS OTH BACTERIAL DIS EC
	32081	ANAEROBIC MENINGITIS
	32082	MENING D/T GRAM-NEG BACT NEC
	32089	MENINGITIS D/T OTHER SPEC BACT
	3209	MENINGITIS D/T UNSPEC BACTERIUM
	3210	CRYPTOCOCCAL MENINGITIS
	3211	MENINGITIS IN OTHER FUNGAL DIS
	3212	MENINGITIS D/T VIRUSES NEC
	3213	MENINGITIS D/T TRYPANOSOMIASIS
	3214	MENINGITIS IN SARCOIDOSIS
	3218	MENINGITIS D/T OTH NONBACT ORG
	3220	NONPYOGENIC MENINGITIS
	3221	EOSINOPHILIC MENINGITIS
	3222	CHRONIC MENINGITIS
	3229	MENINGITIS UNSPECIFIED
	3230	ENCEPHALITIS IN VIRAL DIS EC
	3231	ENCEPHALITIS RICKETTSIAL DIS EC
	3232	ENCEPHALITIS PROTOZOAL DIS EC
	3234	OTH ENCEPHALITIS D/T INFECT EC
	3235	ENCEPHALITIS FOLL IMMUNIZATION
	3236	POSTINFECTIOUS ENCEPHALITIS
	3237	TOXIC ENCEPHALITIS
	3238	OTHER CAUSES OF ENCEPHALITIS
	3239	UNSPEC CAUSE OF ENCEPHALITIS
	7816	MENINGISMUS

Neurology
Clinical Grouping


Cerebrovascular
Investigative Technology?
Yes
No
Diag Inv Cerebrovascular (612)
Management Cerebrovascular (613)

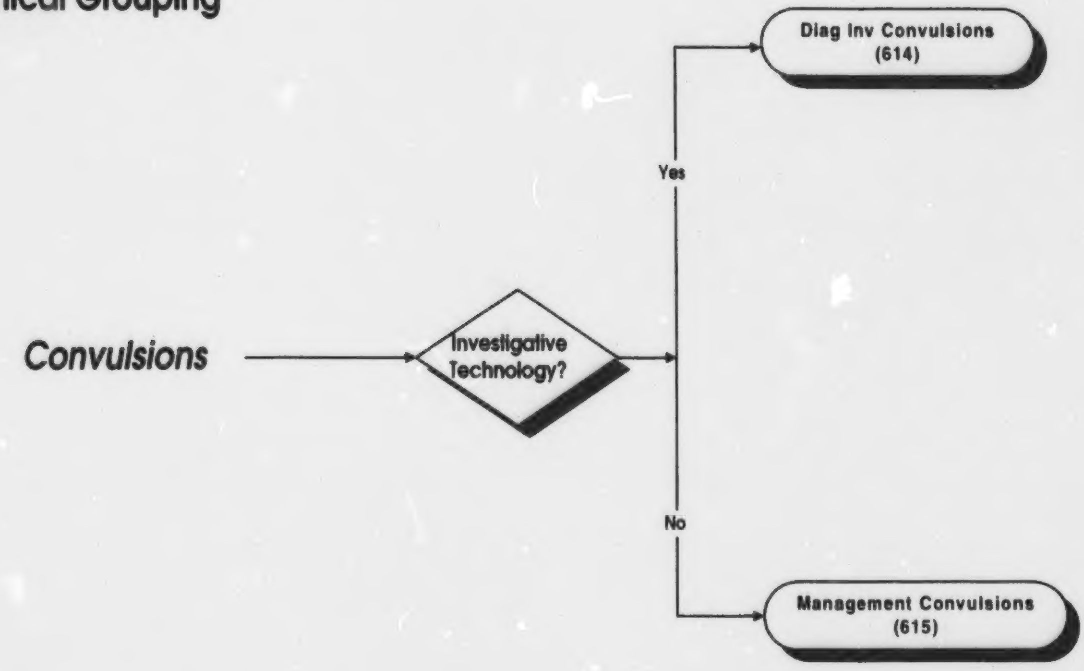
ACCS Grouper
04/96

ACCS CELL
612-613 Cerebrovascular

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
612-613 DIAG INV & MANAGEMENT CEREBROVASCULAR		
	325	PHLEB/THROMBOPHLEB INTRACRANIAL
	3483	ENCEPHALOPATHY UNSPECIFIED
	3488	OTHER CONDITIONS OF BRAIN
	3489	UNSPECIFIED CONDITION OF BRAIN
	430	SUBARACHNOID HEMORRHAGE
	431	INTRACEREBRAL HEMORRHAGE
	4320	NONTRAUM EXTRADURAL HEMORRHAGE
	4321	SUBDURAL HEMORRHAGE
	4329	UNSPEC INTRACRANIAL HEMORRHAGE
	43300	BASILAR ART OCCLUS NO CEREB INF
	43301	BASILAR ART OCCLUS W CEREB INF
	43310	CAROTID ART OCCLUS NO CEREB INF
	43311	CAROTID ART OCCLUS W CEREB INF
	43320	VERTEBRAL ART OCL NO CEREB INF
	43321	VERTEBRAL ART OCL W CEREB INF
	43330	MULT/BILAT ART OCL NO CEREB INF
	43331	MULT/BILAT ART OCL W CEREB INF
	43380	OTH PRECEREB ART OCL NO INFARCT
	43381	OTH PRECEREB ART OCL W INFARCT
	43390	PRECEREB ART OCL NOS NO INFARCT
	43391	PRECEREB ART OCL NOS W INFARCT
	43400	CEREB THROMBOSIS NO CEREB INF
	43401	CEREBRAL THROMBOSIS W CEREB INF
	43410	CEREBRAL EMBOLISM NO CEREB INF
	43411	CEREBRAL EMBOLISM W CEREB INF
	43490	CEREBRAL ART OCL NOS NO INFARCT
	43491	CEREBRAL ART OCL NOS W INFARCT
	4350	BASILAR ARTERY SYNDROME
	4351	VERTEBRAL ARTERY SYNDROME
	4352	SUBCLAVIAN STEAL SYNDROME
	4353	VERTEBROBASILAR ARTERY SYNDROME
	4358	OTH SPEC TRANSIENT CEREB ISCHEM
	4359	UNSPEC TRANSIENT CEREB ISCHEMIA
	436	AC ILL-DEFINED CEREBROVASC DIS
	4370	CEREBRAL ATHEROSCLEROSIS
	4371	OTH GEN ISCHEM CEREBROVASC DIS
	4372	HYPERTENSIVE ENCEPHALOPATHY
	4373	CEREBRAL ANEURYSM NONRUPTURED
	4374	CEREBRAL ARTERITIS
	4375	MOYAMOYA DISEASE
	4376	NONPYO THROMB INTRACRAN VEN SIN
	4377	TRANSIENT GLOBAL AMNESIA
	4378	OTH ILL-DEFINED CEREBROVASC DIS
	4379	UNSPEC ILL-DEF CEREBROVASC DIS
	4380	LATE EFFECTS OF CEREBROVASCULAR DISEASE,COGNITIVE DEFICITS
	43810	LATE EFFECTS OF CEREBROVASCULAR DISEASE SPEECH AND LANGUAGE DEFICIT,UNSPECIFIED
	43811	LATE EFFECTS OF CEREBROVASCULAR DISEASE APHASIA
	43819	LATE EFFECTS OF CEREBROVASCULAR DISEASE OTHER SPEECH AND LANGUAGE DEFICITS
	43820	LATE EFFECTS OF CEREBROVASCULAR DISEASE HEMIPLEGIA AFFECTING UNSPECIFIED SIDE

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
612-613 DIAG INV & MANAGEMENT CEREBROVASCULAR		
	43821	LATE EFFECTS OF CEREBROVASCULAR DISEASE HEMIPLEGIA AFFECTING DOMINANT SIDE
	43822	LATE EFFECTS OF CEREBROVASCULAR DISEASE HEMIPLEGIA AFFECTING NONDOMINANT SIDE
	43830	LATE EFFECTS OF CEREBROVASCULAR DISEASE MONOPLEGIA OF UPPER LIMB AFFECTING UNSPECIFIED SIDE
	43831	LATE EFFECTS OF CEREBROVASCULAR DISEASE MONOPLEGIA OF UPPER LIMB AFFECTING DOMINANT SIDE
	43832	LATE EFFECTS OF CEREBROVASCULAR DISEASE MONOPLEGIA OF UPPER LIMB AFFECTING NONDOMINANT SIDE
	43840	LATE EFFECTOS OF CEREBROVASCULAR DISEASE MONOPLEGIA AFFECTING LOWER LIMB UNSPECIFIED SIDE
	43841	LATE EFFECTS OF CEREBROVASCULAR DISEASE MONOPLEGIA OF LOWER LIMB AFFECTING DOMINANT SIDE
	43842	LATE EFFECTS OF CEREBROVASCULAR DISEASE MONOPLEGIA OF LOWER LIMB AFFECTING NONDOMINAT SIDE
	43850	LATE EFFECTS OF CEREBROVASCULAR DISEASE OTHER PARALYTIC SYNDROME AFFECTING UNSPECIFIED SIDE
	43851	LATE EFFECTS OF CEREBROVASCULAR DISEASE OTHER PARALYTIC SYNDROME AFFECTING DOMINANT SIDE
	43852	LATE EFFECTS OF CEREBROVASCULAR DISEASE OTHER PARALYTIC SYNDROME AFFECTING NONDOMINANT SIDE
	43853	L/E CVD OTH PARALYTIC SYN BILAT
	43881	LATE EFFECTS OF CEREBROVASCULAR DISEASE APRAXIA
	43882	LATE EFFECTS OF CEREBROVASCULAR DISEASE DYSPHAGIA
	43889	LATE EFFECTS OF CEREBROVASCULAR DISEASE
	4389	UNSPECIFIED LATE EFFECTS OF CEREBROVASCULAR DISEASE
	74781	ANOMALIES CEREBROVASCULAR SYS
	78002	TRANSIENT ALTERATION AWARENESS
	7802	SYNCOPE AND COLLAPSE

Neurology
Clinical Grouping


Convulsions
Investigative Technology?
Yes
No
Diag Inv Convulsions (614)
Management Convulsions (615)

ACCS Grouper
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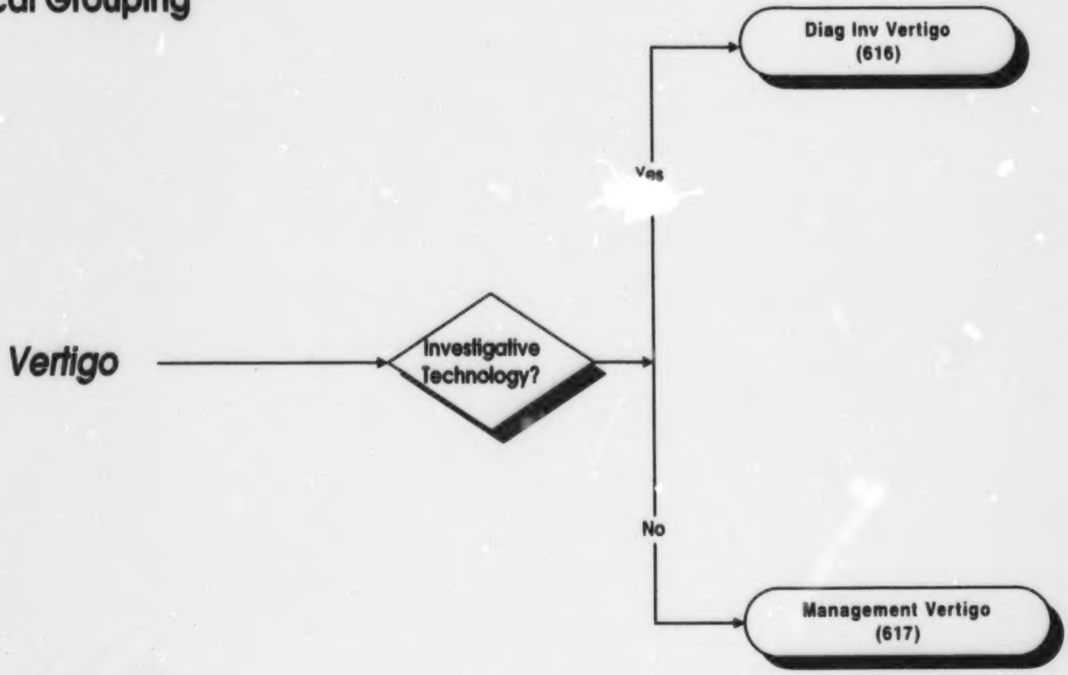
ACCS CELL
614-615 Convulsions

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
614-615 DIAG INV & MANAGEMENT CONVULSIONS		
	34500	GEN NONCONVUL EPILEP NO INTRACT
	34501	GEN NONCONVUL EPILEP W INTRACT
	34510	GEN CONVUL EPILEPSY NO INTRACT
	34511	GEN CONVUL EPILEPSY W INTRACT
	3452	PETIT MAL STATUS
	3453	GRAND MAL STATUS
	34540	PART EPILEP IMP CONSC NO INTRAC
	34541	PART EPILEP IMP CONSC W INTRACT
	34550	PART EPILEP NO IMP NO INTRACT
	34551	PART EPILEP NO IMPAIR W INTRACT
	34560	INFANTILE SPASMS NO INTRACTABLE
	34561	INFANTILE SPASMS W INTRACTABLE
	34570	EPILEP PART CONTINUA NO INTRACT
	34571	EPILEP PART CONTINUA W INTRACT
	34580	OTHER FORMS EPILEPSY NO INTRACT
	34581	OTHER FORMS EPILEPSY W INTRACT
	34590	UNSPECIFIED EPILEPSY NO INTRACT
	34591	UNSPECIFIED EPILEPSY W INTRACT
	78031	FEBRILE CONVULSIONS
	78039	OTHER CONVULSIONS

Neurology Clinical Grouping

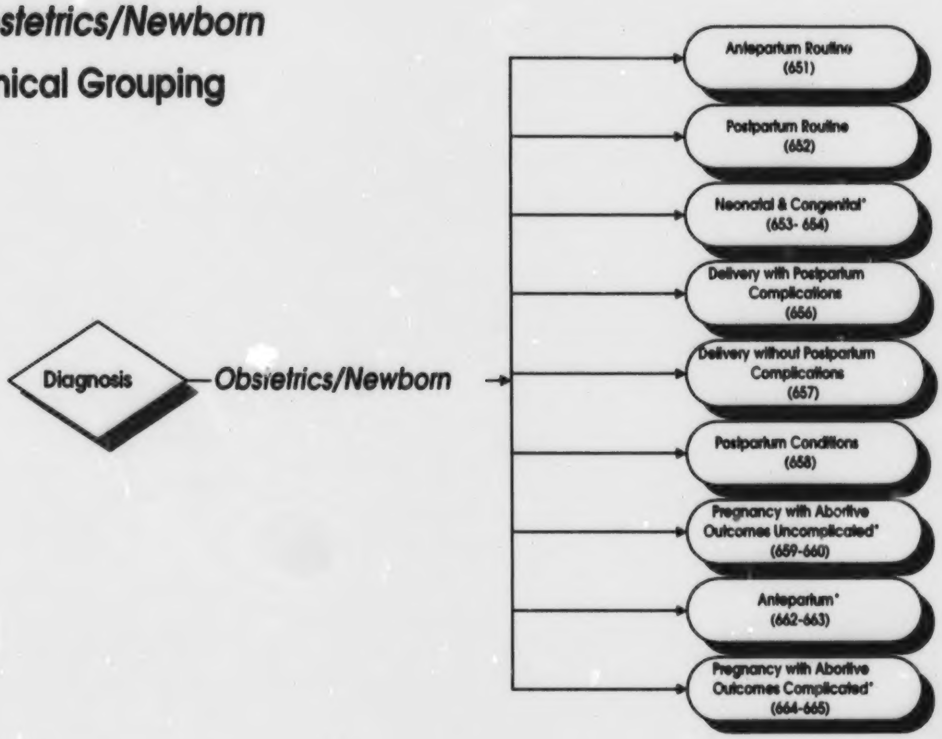

Vertigo
Investigative Technology?
Yes
No
Diag Inv Vertigo (616)
Management Vertigo (617)

ACCS Grouper
04/96

ACCS CELL
616-617 Vertigo

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
616-617 DIAG INV & MANAGEMENT VERTIGO		
	07881	EPIDEMIC VERTIGO
	38600	MENIERE'S DISEASE UNSPECIFIED
	38601	ACT MENIERE'S DIS COCHLEOVESTIB
	38602	ACTIVE MENIERE'S DIS COCHLEAR
	38603	ACTIVE MENIERE'S DIS VESTIBULAR
	38604	INACTIVE MENIERE'S DISEASE
	38610	PERIPHERAL VERTIGO UNSPECIFIED
	38611	BEN PAROXYSMAL POSITION VERTIGO
	38612	VESTIBULAR NEURONITIS
	38619	OTHER PERIPHERAL VERTIGO
	3862	VERTIGO OF CENTRAL ORIGIN
	38630	LABYRINTHITIS UNSPECIFIED
	38631	SEROUS LABYRINTHITIS
	38632	CIRCUMSCRIBED LABYRINTHITIS
	38633	SUPPURATIVE LABYRINTHITIS
	38634	TOXIC LABYRINTHITIS
	38635	VIRAL LABYRINTHITIS
	38640	LABYRINTHINE FISTULA UNSPEC
	38641	ROUND WINDOW FISTULA
	38642	OVAL WINDOW FISTULA
	38643	SEMICIRCULAR CANAL FISTULA
	38648	LABYRINTHINE FISTULA COMBINED
	38650	LABYRINTHINE DYSFUNCTION UNSPEC
	38651	HYPERACTIVE LABYRINTH UNILAT
	38652	HYPERACTIVE LABYRINTH BILATERAL
	38653	HYPOACTIVE LABYRINTH UNILATERAL
	38654	HYPOACTIVE LABYRINTH BILATERAL
	38655	LOSS LABYRINTHINE RXN UNILAT
	38656	LOSS LABYRINTHINE RXN BILATERAL
	38658	OTH FORM LABYRINTHINE DYSFUNCT
	3868	OTHER DISORDERS OF LABYRINTH
	3869	UNSPEC VERTIGO/LABYRINTH DISORD
	7804	DIZZINESS AND GIDDINESS
	79416	ABNORM VESTIBULAR FUNCT STUDIES

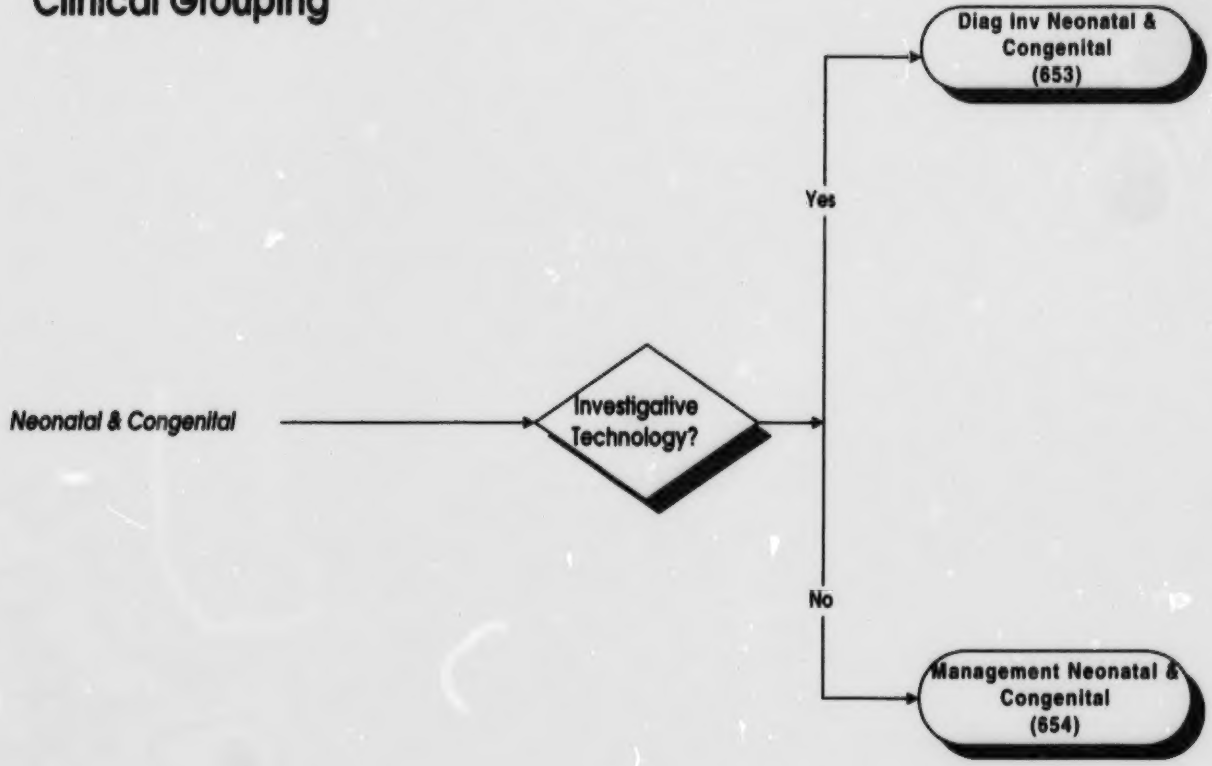
Obstetrics/Newborn
Clinical Grouping


Diagnosis
Obstetrics/Newborn
Antepartum Routine (651)
Postpartum Routine (652)
Neonatal & Congenital* (653- 654)
Delivery with Postpartum Complications (656)
Delivery without Postpartum Complications (657)
Postpartum Conditions (658)
Pregnancy with Abortive Outcomes Uncomplicated* (659-660)
Antepartum* (662-663)
Pregnancy with Abortive Outcomes Complicated* (664-665)

*Clinical Group broken down further - see following pages.

ACCS Grouper
04/96

Obstetrics/Newborn Clinical Grouping


Neonatal & Congenital
Investigative Technology?
Yes
No
Diag Inv Neonatal & Congenital (653)
Management Neonatal & Congenital (654)

ACCS Grouper
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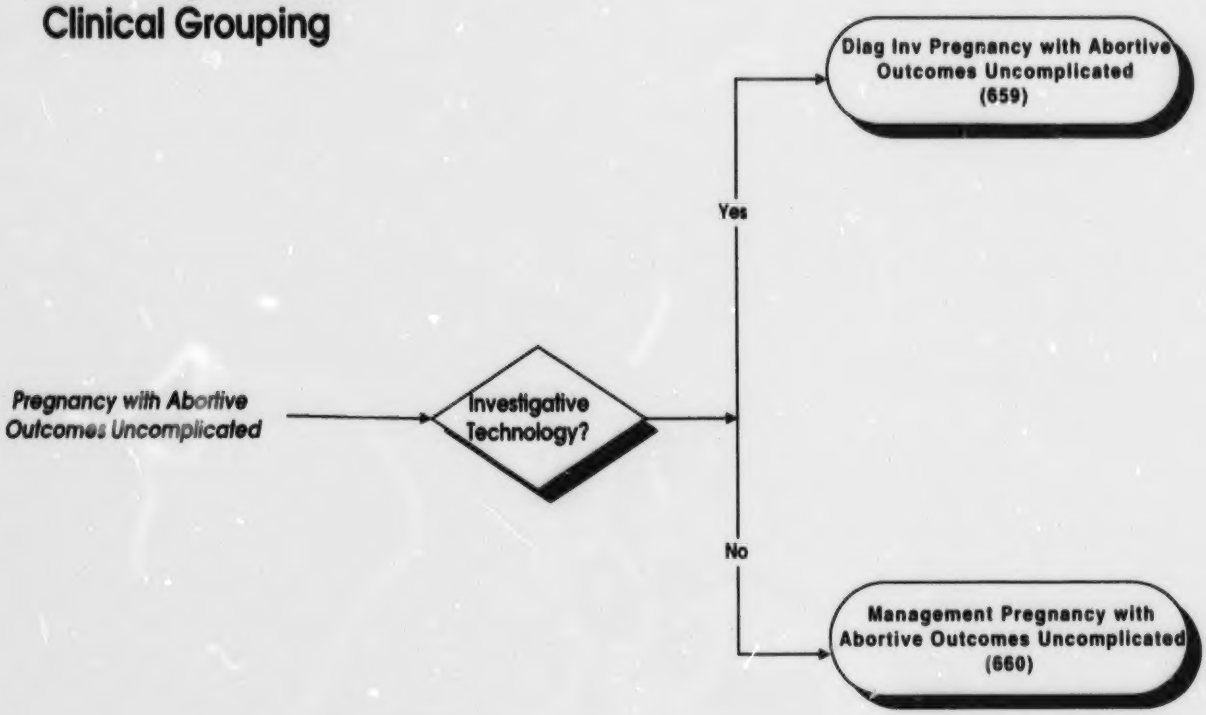
Obstetrics/Newborn Clinical Grouping


Pregnancy with Abortive Outcomes Uncomplicated
Investigative Technology?
Yes
Diag Inv Pregnancy with Abortive Outcomes Uncomplicated (659)
No
Management Pregnancy with Abortive Outcomes Uncomplicated (660)

ACCS Grouper
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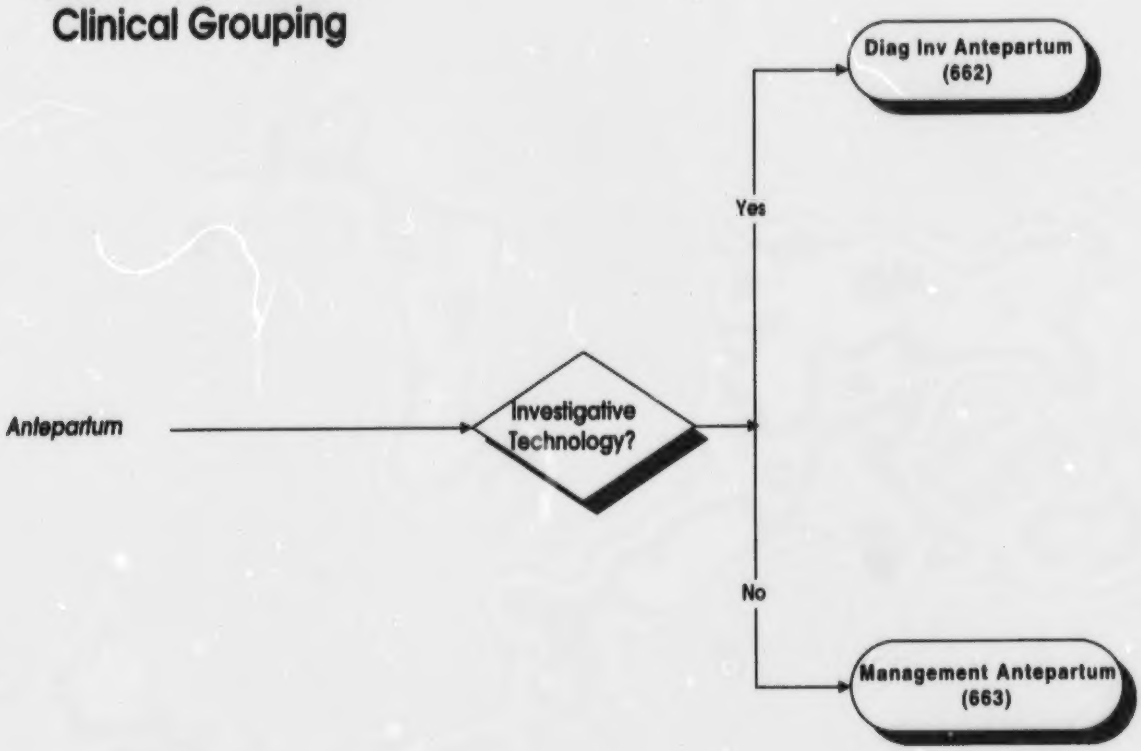
Obstetrics/Newborn Clinical Grouping


Antepartum
Investigative Technology?
Yes
Diag Inv Antepartum (662)
No
Management Antepartum (663)

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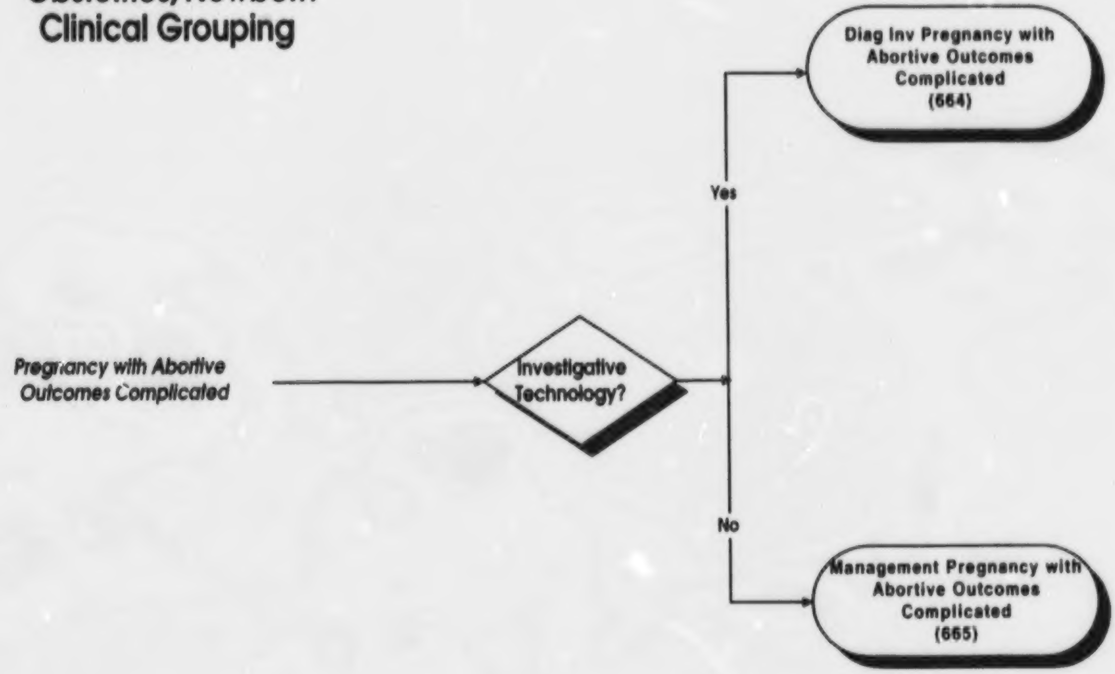
Obstetrics/Newborn Clinical Grouping


Pregnancy with Abortive Outcomes Complicated
Investigative Technology?
Yes
No
Diag Inv Pregnancy with Abortive Outcomes Complicated (664)
Management Pregnancy with Abortive Outcomes Complicated (665)

ACCS Grouper
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ACCS CELL
651 Antepartum Routine

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
651 ANTEPARTUM ROUTINE		
	V220	SUPERVIS NORMAL FIRST PREGNANCY
	V221	SUPERVIS OTHER NORMAL PREGNANCY
	V222	PREGNANT STATE INCIDENTAL

ACCS CELL
652 Postpartum Routine

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
652 POSTPARTUM ROUTINE		
	V240	POSTPART CARE IMMED AFTER DELIV
	V241	LACTATING MOTHER
	V242	ROUTINE POSTPARTUM FOLLOW-UP

ACCS CELL
653-654 Neonatal & Congenital

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
653-654 DIAG INV & MANAGEMENT NEONATAL AND CONGENITAL		
	7589	COND D/T ANOM UNSPEC CHROMOSOME
	7594	CONJOINED TWINS
	7597	MULT CONGEN ANOM SO DESCRIBED
	75981	PRADER-WILLI SYNDROME
	75982	MARFAN SYNDROME
	75983	FRAGILE X SYNDROME
	75989	OTHER SPECIFIED ANOMALIES
	7599	CONGENITAL ANOMALY UNSPECIFIED
	7600	MAT HYPERTENS DISORD AFF FET/NB
	7601	MAT REN/URINARY DIS AFF FET/NB
	7602	MATERNAL INFECTIONS AFF FET/NB
	7603	OTH CHR MAT CIR/RESP AFF FET/NB
	7604	MAT NUTRITION DISORD AFF FET/NB
	7605	MATERNAL INJURY AFFECT FETUS/NB
	7606	SURG OP ON MOTHER AFFECT FET/NB
	76070	NOX INFLUENCE NOS VIA PLAC/MILK
	76071	ALC VIA PLAC/MILK AFF FETUS/NB
	76072	NARCOT VIA PLAC/MILK AFF FET/NB
	76073	HALLUC VIA PLAC/MILK AFF FET/NB
	76074	ANTIINFECT PLAC/MILK AFF FET/NB
	76075	COCAIN VIA PLAC/MILK AFF FET/NB
	76076	DES VIA PLAC/MILK AFF FETUS/NB
	76079	OTH NOX INFLUENCE VIA PLAC/MILK
	7608	OTH SPEC MAT COND AFFECT FET/NB
	7609	MAT COND NOS AFFECTING FETUS/NB
	7610	INCOMPETENT CERVIX AFF FETUS/NB
	7611	PREMATURE RUPT MEMB AFF FET/NB

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
653-654 DIAG INV & MANAGEMENT NEONATAL AND CONGENITAL		
	7612	OLIGOHYDRAMNIOS AFFECT FETUS/NB
	7613	POLYHYDRAMNIOS AFFECTING FET/NB
	7614	ECTOPIC PREGNANCY AFFECT FET/NB
	7615	MULTIPLE PREGNANCY AFF FETUS/NB
	7616	MATERNAL DEATH AFFECTING FET/NB
	7617	MALPRESENT PRELABOR AFF FET/NB
	7618	OTH MAT COMPL PREG AFF FETUS/NB
	7619	MAT COMPL PREG NOS AFF FETUS/NB
	7620	PLACENTA PREVIA AFFECT FETUS/NB
	7621	OTH PLAC SEPARAT/HEM AFF FET/NB
	7622	OTH ABNORM PLACENTA AFF FET/NB
	7623	PLAC TRANSFUSN SYND AFF FET/NB
	7624	PROLAPSED CORD AFFECTING FET/NB
	7625	OTH COMPRESS CORD AFFECT FET/NB
	7626	OTH/NOS COND CORD AFFECT FET/NB
	7627	CHORIOAMNIONITIS AFFECT FET/NB
	7628	OTH ABNORM CHOR/AMNI AFF FET/NB
	7629	ABNORM CHOR/AMNI NOS AFF FET/NB
	7630	BREECH DELIV/EXTRACT AFF FET/NB
	7631	OTH MALPRESENT/MALPOSIT/DISPROP
	7632	FORCEPS DELIVERY AFFECT FET/NB
	7633	DELIV VACUUM EXTRACT AFF FET/NB
	7634	CESAREAN DELIVERY AFFECT FET/NB
	7635	MAT ANESTH/ANALGESIA AFF FET/NB
	7636	PRECIPITATE DELIV AFFECT FET/NB
	7637	ABNORM UT CONTRACT AFF FETUS/NB
	7639	COMPL LAB/DELIV NOS AFF FET/NB
	76381	ABNORM FETAL HRT RATE BEF LABOR
	76382	ABNORM FETAL HRT RATE DUR LABOR
	76383	ABNORM FETAL HRT RATE UNS ONSE
	76389	OTH COMPL LAB/DELIV AFF FET/NB
	76400	LIGHT-FOR-DATES NO MALN WT NOS
	76401	LIGHT-FOR-DATES LESS THAN 500 G
	76402	LIGHT-FOR DATES 500-749 GRAMS
	76403	LIGHT-FOR DATES 750-999 GRAMS
	76404	LIGHT-FOR-DATES 1000-1249 GRAMS
	76405	LIGHT-FOR-DATES 1250-1499 GRAMS
	76406	LIGHT-FOR-DATES 1500-1749 GRAMS
	76407	LIGHT-FOR-DATES 1750-1999 GRAMS
	76408	LIGHT-FOR-DATES 2000-2499 GRAMS
	76409	LIGHT-FOR-DATE MORE THAN 2500 G
	76410	LIGHT-DATES W MALN WEIGHT NOS
	76411	LIGHT-DATES W MALN LESS 500 G
	76412	LIGHT-DATES W MALN 500-749 GRAM
	76413	LIGHT-DATES W MALN 750-999 GRAM
	76414	LIGHT-DATES W MALN 1000-1249 G
	76415	LIGHT-DATES W MALN 1250-1499 G
	76416	LIGHT-DATES W MALN 1500-1749 G
	76417	LIGHT-DATES W MALN 1750-1999 G
	76418	LIGHT-DATES W MALN 2000-2499 G
	76419	LIGHT-DATES W MALN OVER 2500 G
	76420	FETAL MALNUTRITION WEIGHT NOS
	76421	FETAL MALNUTRITION LESS 500 G
	76422	FETAL MALNUTRITION 500-749 GRAM
	76423	FETAL MALNUTRITION 750-999 GRAM
	76424	FETAL MALNUTRITION 1000-1249 G

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
653-654 DIAG INV & MANAGEMENT NEONATAL AND CONGENITAL		
	76425	FETAL MALNUTRITION 1250-1499 G
	76426	FETAL MALNUTRITION 1500-1749 G
	76427	FETAL MALNUTRITION 1750-1999 G
	76428	FETAL MALNUTRITION 2000-2499 G
	76429	FETAL MALNUTRITION OVER 2500 G
	76490	FETAL GROWTH RETARD WEIGHT NOS
	76491	FETAL GROWTH RETARD LESS 500 G
	76492	FETAL GROWTH RETARD 500-749 G
	76493	FETAL GROWTH RETARD 750-999 G
	76494	FETAL GROWTH RETARD 1000-1249 G
	76495	FETAL GROWTH RETARD 1250-1499 G
	76496	FETAL GROWTH RETARD 1500-1749 G
	76497	FETAL GROWTH RETARD 1750-1999 G
	76498	FETAL GROWTH RETARD 2000-2499 G
	76499	FETAL GROWTH RETARD OVER 2500 G
	76500	EXTREME IMMATURITY WEIGHT NOS
	76501	EXTREME IMMATURITY LESS 500 G
	76502	EXTREME IMMATURITY 500-749 GRAM
	76503	EXTREME IMMATURITY 750-999 GRAM
	76504	EXTREME IMMATURITY 1000-1249 G
	76505	EXTREME IMMATURITY 1250-1499 G
	76506	EXTREME IMMATURITY 1500-1749 G
	76507	EXTREME IMMATURITY 1750-1999 G
	76508	EXTREME IMMATURITY 2000-2499 G
	76509	EXTREME IMMATURITY OVER 2500 G
	76510	OTH PRETERM INFANTS WEIGHT NOS
	76511	OTH PRETERM INFANTS LESS 500 G
	76512	OTH PRETERM INFANTS 500-749 G
	76513	OTH PRETERM INFANTS 750-999 G
	76514	OTH PRETERM INFANTS 1000-1249 G
	76515	OTH PRETERM INFANTS 1250-1499 G
	76516	OTH PRETERM INFANTS 1500-1749 G
	76517	OTH PRETERM INFANTS 1750-1999 G
	76518	OTH PRETERM INFANTS 2000-2499 G
	76519	OTH PRETERM INFANTS OVER 2500 G
	7660	EXCEPTIONALLY LARGE BABY
	7661	OTHER HEAVY-FOR-DATES INFANTS
	7662	POST-TERM NB NOT HEAVY-FOR-DATE
	7670	SUBDURAL/CEREBRAL HEMORRHAGE
	7671	INJURIES TO SCALP
	7672	FRACTURE OF CLAVICLE
	7673	OTHER INJURIES TO SKELETON
	7674	INJURY TO SPINE AND SPINAL CORD
	7675	FACIAL NERVE INJURY
	7676	INJURY TO BRACHIAL PLEXUS
	7677	OTH CRANIAL/PERIPH NERVE INJURY
	7678	OTHER SPECIFIED BIRTH TRAUMA
	7679	UNSPECIFIED BIRTH TRAUMA
	7680	FET DEATH ASPHYX/ANOX BEF LABOR
	7681	FET DEATH ASPHYX/ANOX DUR LABOR
	7682	FET DISTRESS BEF LABOR LIVEBORN
	7683	FET DISTRESS DUR LABOR LIVEBORN
	7684	FETAL DISTRESS UNSPEC ONSET
	7686	MILD OR MODERATE BIRTH ASPHYXIA
	7689	UNSPEC BIRTH ASPHYXIA LIVEBORN
	769	RESPIRATORY DISTRESS SYNDROME

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
653-654 DIAG INV & MANAGEMENT NEONATAL AND CONGENITAL		
	7700	CONGENITAL PNEUMONIA
	7701	MECONIUM ASPIRATION SYNDROME
	7702	INTERSTITIAL EMPHYSEMA/REL COND
	7703	PULMONARY HEMORRHAGE
	7704	PRIMARY ATELECTASIS
	7705	OTHER/UNSPECIFIED ATELECTASIS
	7706	TRANSITORY TACHYPNEA OF NEWBORN
	7707	CHR RESP DIS ARISING PERINATAL
	7708	OTHER RESP PROBLEMS AFTER BIRTH
	7709	UNSPEC RESP COND FETUS/NEWBORN
	7710	CONGENITAL RUBELLA
	7711	CONGEN CYTOMEGALOVIRUS INFECT
	7712	OTHER CONGENITAL INFECTIONS
	7713	TETANUS NEONATORUM
	7714	OMPHALITIS OF NEWBORN
	7715	NEONATAL INFECTIVE MASTITIS
	7716	NEONAT CONJUNCT/DACRYOCYSTITIS
	7717	NEONATAL CANDIDA INFECTION
	7718	OTHER INFECTION SPEC PERINATAL
	7720	FETAL BLOOD LOSS
	7721	FET/NEONAT INTRAVENTRICULAR HEM
	7722	FETAL/NEONATAL SUBARACHNOID HEM
	7723	UMBIL HEMORRHAGE AFTER BIRTH
	7724	FET/NEONAT GASTROINTESTINAL HEM
	7725	FET/NEONAT ADRENAL HEMORRHAGE
	7726	FET/NEONAT CUTANEOUS HEMORRHAGE
	7728	OTH SPEC FETAL/NEONAT HEMORRHAG
	7729	FETAL/NEONATAL HEMORRHAGE NOS
	7730	HEMOLYTIC DIS D/T RH ISOIMMUN
	7731	HEMOLYTIC DIS D/T ABO ISOIMMUN
	7732	HEMOLYTIC DIS OTH/NOS ISOIMMUN
	7733	HYDROPS FETALIS D/T ISOIMMUN
	7734	KERNICTERUS D/T ISOIMMUNIZATION
	7735	LATE ANEMIA D/T ISOIMMUNIZATION
	7740	PERINAT JAUND HERED HEMOL ANEM
	7741	PERINAT JAUND OTH EXCES HEMOLYS
	7742	NEONAT JAUNDICE W PRETERM DELIV
	77430	NEONAT JAUND DELAY CONJUGAT NOS
	77431	NEONAT JAUND DELAY CONJ DIS EC
	77439	NEONAT JAUND OTH DELAY CONJUGAT
	7744	PERINAT JAUND D/T HEPAT DAMAGE
	7745	PERINATAL JAUNDICE OTHER CAUSES
	7746	UNSPEC FETAL/NEONATAL JAUNDICE
	7747	KERNICTERUS NOT D/T ISOIMMUN
	7750	SYNDROME INFANT DIABETIC MOTHER
	7751	NEONATAL DIABETES MELLITUS
	7752	NEONATAL MYASTHENIA GRAVIS
	7753	NEONATAL THYROTOXICOSIS
	7754	HYPOCALCEMIA/HYPOMAGNESEMIA NB
	7755	OTH TRANS NEONAT ELECT DISTURB
	7756	NEONATAL HYPOGLYCEMIA
	7757	LATE METABOLIC ACIDOSIS OF NB
	7758	OTH TRANS NEONAT ENDO/MET DIST
	7759	ENDO/MET DISTURB FETUS/NB NOS
	7760	HEMORRHAGIC DISEASE OF NEWBORN
	7761	TRANS NEONATAL THROMBOCYTOPENIA

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
653-654 DIAG INV & MANAGEMENT NEONATAL AND CONGENITAL		
	7762	DISSEM INTRAVASCULAR COAG IN NB
	7763	OTH TRANS NEONATAL DISORD COAG
	7764	POLYCYTHEMIA NEONATORUM
	7765	CONGENITAL ANEMIA
	7766	ANEMIA OF PREMATURITY
	7767	TRANSIENT NEONATAL NEUTROPENIA
	7768	OTH SPEC TRANS HEMATOLOG DISORD
	7769	UNSPEC HEMATOLOG DISORD FET/NB
	7771	MECONIUM OBSTRUCTION
	7772	INTEST OBSTRUCT INSPISSATE MILK
	7773	HEMATEM/MELENA SWALL MAT BLOOD
	7774	TRANSITORY ILEUS OF NEWBORN
	7775	NECROTIZING ENTEROCOLIT FET/NB
	7776	PERINAT INTESTINAL PERFORATION
	7778	OTH PERINATAL DISORD DIGEST SYS
	7779	PERINATAL DISORD DIGEST SYS NOS
	7780	HYDROPS FETALIS NOT ISOIMMUN
	7781	SCLEREMA NEONATORUM
	7782	COLD INJURY SYNDROME OF NEWBORN
	7783	OTHER HYPOTHERMIA OF NEWBORN
	7784	OTH DISTURB TEMP REGULATION NB
	7785	OTHER/UNSPEC EDEMA OF NEWBORN
	7786	CONGENITAL HYDROCELE
	7787	BREAST ENGORGEMENT IN NEWBORN
	7788	OTHER COND INTEGUMENT FETUS/NB
	7789	COND INTEGUMENT/TEMP FET/NB NOS
	7790	CONVULSIONS IN NEWBORN
	7791	OTH/NOS CEREB IRRITABILITY NB
	7792	CEREBRAL DEPRES/COMA/OTH ABNORM
	7793	FEEDING PROBLEMS IN NEWBORN
	7795	DRUG WITHDRAWAL SYNDROME IN NB
	7798	OTH COND ORIG PERINATAL PERIOD
	7799	UNSPEC COND ORIG PERINAT PERIOD
	7952	NONSPEC ABNORM FIND CHROMOSOMAL
	V290	OBS NB SUSPECT INFECT CONDITION
	V291	OBS NB SUSPECT NEURO CONDITION
	V292	OBS NB SUSPECT RESPIRATORY COND
	V293	OBS NB SUSPECT GEN/METABOL COND
	V298	OBS NB OTH SPEC SUSPECTED COND
	V299	OBS NB UNSPEC SUSPECT CONDITION
	V3000	SINGLE LIVEBORN IN HOSP NO C/D
	V3001	SINGLE LIVEBORN IN HOSP W C/D
	V301	SINGLE LIVE INF BORN BEF HOSP
	V302	SINGLE LIVE INFANT NOT HOSP
	V3100	TWIN MATE LIVEBORN HOSP NO C/S
	V3101	TWIN MATE LIVEBORN HOSP W C/S
	V311	TWIN MATE LIVE BORN BEFORE HOSP
	V312	TWIN MATE LIVE BORN NOT HOSP
	V3200	TWIN MATE SB IN HOSP NO C/S
	V3201	TWIN MATE SB IN HOSP W C/S
	V321	TWIN MATE SB BORN BEFORE HOSP
	V322	TWIN MATE STILLBORN NOT HOSP
	V3300	TWIN UNSPEC BORN IN HOSP NO C/S
	V3301	TWIN UNSPEC BORN IN HOSP W C/S
	V331	TWIN UNSPEC BORN BEFORE HOSP
	V332	TWIN UNSPEC NOT HOSPITALIZED

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
653-654 DIAG INV & MANAGEMENT NEONATAL AND CONGENITAL		
	V3400	OTH MULT MATES LIVE HOSP NO C/S
	V3401	OTH MULT MATES LIVE HOSP W C/S
	V341	OTH MULT MATES LIV BORN BEF HSP
	V342	OTH MULT MATES LIVE NOT HOSP
	V3500	OTH MULT MATES SB HOSP NO C/S
	V3501	OTH MULT MATES SB IN HOSP W C/S
	V351	OTH MULT MATES SB BORN BEF HOSP
	V352	OTH MULTIPLE MATES SB NOT HOSP
	V3600	OTH MULT LIV/SB IN HOSP NO C/D
	V3601	OTH MULT LIV/SB IN HOSP W C/D
	V361	OTH MULT MATES LIVE/SB BEF HOSP
	V362	OTH MULT MATES LIVE/SB NOT HOSP
	V3700	OTH MULT UNSPEC IN HOSP NO C/D
	V3701	OTH MULT UNSPEC IN HOSP W C/D
	V371	OTH MULT UNSPEC BORN BEF HOSP
	V372	OTH MULTIPLE UNSPEC NOT HOSP
	V3900	UNSPEC TYPE BIRTH HOSP NO C/D
	V3901	UNSPEC TYPE BIRTH IN HOSP W C/D
	V391	UNSPEC TYPE BIRTH BORN BEF HOSP
	V392	UNSPEC TYPE BIRTH NOT HOSP

ACCS CELL
656 Delivery With Postpartum Complications

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
656 DELIVERY WITH POSTPARTUM COMPLICATIONS		
	64202	ESSENT HYPERTENSION/DEL W COMPL
	64212	RENAL HYPERTENSION/DEL W COMPL
	64222	OTH PRE-PREG HYPERTEN/DEL/COMPL
	64232	TRANS HYPERTEN PREG/DEL W COMPL
	64242	MILD/NOS PREECLAMPS/DEL W COMPL
	64252	SEVERE PREECLAMPSIA/DEL W COMPL
	64262	ECLAMPSIA/DELIVERED W COMPLICAT
	64272	ECLAMPS W PRE-HYPER/DEL W COMPL
	64292	HYPERTENS NOS PREG/DEL W COMPL
	64612	EDEMA/EXCESS WEIGHT/DEL W COMPL
	64622	RENAL DIS NOS PREG/DEL W COMPL
	64642	PERIPH NEURIT PREG/DEL W COMPL
	64652	ASYMPT BACTERIURIA/DEL W COMPL
	64662	INFECT GU IN PREG/DEL W COMPL
	64682	OTH SPEC COMPL PREG/DEL W COMPL
	64702	SYPHILIS IN PREG/DELIV W COMPL
	64712	GONORRHEA IN PREG/DELIV W COMPL
	64722	OTH VENEREAL DIS/DELIV W COMPL
	64732	TUBERCULOSIS PREG/DELIV W COMPL
	64742	MALARIA PREGNANCY/DELIV W COMPL
	64752	RUBELLA PREGNANCY/DELIV W COMPL
	64762	OTH VIRAL DIS PREG/DEL W COMPL
	64782	OTH SPEC INFECT PREG/DEL/COMPL
	64792	INFECT/INFEST NOS/DELIV W COMPL
	64802	DIABETES MELLITUS/DELIV W COMPL
	64812	THYROID DYSFUNCT/DELIV W COMPL
	64822	ANEMIA IN PREG/DELIV W COMPL
	64832	DRUG DEPEND PREG/DELIV W COMPL
	64842	MENTAL DISORD PREG/DEL W COMPL
	64852	CONGEN CV DISORD/DELIV W COMPL
	64862	OTHER CV DIS PREG/DELIV W COMPL
	64872	BONE/JOINT DISORD/DELIV W COMPL
	64882	ABNORM GLUCOSE PREG/DEL W COMPL
	64892	OTH COND EC IN PREG/DEL W COMPL
	65402	CONGEN ABNORM UTERUS/DEL/COMPL
	65412	TUMOR BODY UTERUS/DELIV W COMPL
	65432	RETRO/INCARC UTERUS/DEL W COMPL
	65442	OTH ABNORM GRAV UT/DELIV/COMPL
	65452	CERV INCOMPETENCE/DELIV W COMPL
	65462	OTH ABNORM CERVIX/DELIV W COMPL
	65472	ABNORM OF VAGINA/DELIV W COMPL
	65482	ABNORMALITY VULVA/DELIV W COMPL
	65492	OTH/NOS ABNORM PELV/DEL W COMPL
	66522	INVERSION UTERUS/DELIV W COMPL
	66572	PELVIC HEMATOMA/DELIV W COMPL
	66582	OTH SPEC OBS TRAUMA/DEL W COMPL
	66592	UNSPEC OBS TRAUMA/DELIV W COMPL
	66602	3RD STAGE HEMORRHAG/DEL W COMPL
	66612	OTH IMMED POSTPRT HEM/DEL/COMPL
	66622	DELAY/2ND POSTPRT HEM/DEL/COMPL
	66632	POSTPART COAG DEF/DELIV W COMPL
	66702	RETAIN PLAC NO HEM/DEL W COMPL

ACCS Cell	**ICD-9-CM Code**	**ICD-9-CM Diagnosis Description**
656 DELIVERY WITH POSTPARTUM COMPLICATIONS		
	66712	RET PORTN PLAC NO HEM/DEL/COMPL
	66802	PULM COMPL ANESTH/DELIV W COMPL
	66812	CARD COMPL ANESTH/DELIV W COMPL
	66822	CNS COMPL ANESTH/DELIV W COMPL
	66882	OTH COMPL ANESTH/DELIV W COMPL
	66892	UNSPEC COMPL ANESTH/DEL W COMPL
	66902	MATERNAL DISTRESS/DELIV W COMPL
	66922	MAT HYPOTENS SYND/DELIV W COMPL
	66932	ACUTE RF FOLL DELIV/DEL W COMPL
	66942	OTH COMPL SURG/PROC/DEL W COMPL
	66982	OTH COMPL LAB/DELIV/DEL W COMPL
	66992	COMPL LAB/DELIV NOS/DEL W COMPL
	67002	MAJ PUERPER INFECT/DEL W COMPL
	67102	VARIC VEIN LEG PREG/DEL W COMPL
	67112	VARIC VEIN VULVA PREG/DEL/COMPL
	67122	SUPERFIC THROMBOPHLEB/DEL/COMPL
	67142	POSTPARTUM DVT/DELIV W COMPL
	67152	OTH PHLEB/THROMB PREG/DEL/COMPL
	67182	OTH VEN COMPL PREG/DEL W COMPL
	67192	VEN COMPL NOS PREG/DEL W COMPL
	67202	PYREXIA DUR PUERPER/DEL W COMPL
	67302	OBS AIR EMBOLISM/DELIV W COMPL
	67312	AMNIO FLUID EMBOLISM/DEL/COMPL
	67322	OBS BLOODCLOT EMBOL/DEL W COMPL
	67332	OBS SEPTIC EMBOLISM/DEL W COMPL
	67382	OTH OBS PULM EMBOL/DEL W COMPL
	67402	PUERPER CV DISORD/DELIV W COMPL
	67412	DISRUPT CESAREAN WND/DEL/COMPL
	67422	DISRUPT PERINEAL WND/DEL/COMPL
	67432	OTH COMPL SURG WND/DEL W COMPL
	67442	PLACENTAL POLYP/DELIV W COMPL
	67482	OTH PUERPER COMPL NEC/DEL/COMPL
	67492	PUERPERAL COMPL NOS/DEL W COMPL
	67502	INF NIPPLE PREG/DELIV W COMPL
	67512	ABSCESS BREAST PREG/DEL W COMPL
	67522	NONPUR MASTITIS PREG/DEL/COMPL
	67582	OTH INF BREAST PREG/DEL W COMPL
	67592	INF BREAST NOS PREG/DEL W COMPL
	67602	RETRACT NIPPLE PREG/DEL W COMPL
	67612	CRACK NIPPLE PREG/DELIV W COMPL
	67622	ENGORGE BREAST PREG/DEL W COMPL
	67632	OTH DISORD BREAST/DELIV W COMPL
	67642	FAIL LACTATION PREG/DEL W COMPL
	67652	SUPPRESS LACT PREG/DEL W COMPL
	67662	GALACTORRHEA PREG/DELIV W COMPL
	67682	OTH DISORD LACT PREG/DEL/COMPL
	67692	DISORD LACT NOS PREG/DEL/COMPL

ACCS CELL
657 Delivery Without Postpartum Complications

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
657 DELIVERY WITHOUT POSTPARTUM COMPLICATIONS		
	64001	THREATENED ABORTION/DELIVERED
	64081	OTH SPEC HEM EARLY PREG/DELIV
	64091	UNSPEC HEM EARLY PREG/DELIVERED
	64101	PLACENTA PREVIA NO HEM/DELIV
	64111	PLACENTA PREVIA W HEM/DELIVERED
	64121	PREM SEPARATION PLACENTA/DELIV
	64131	ANTEPART HEM W COAG DEF/DELIV
	64181	OTH ANTEPART HEMORRHAGE/DELIV
	64191	UNSPEC ANTEPARTUM HEM/DELIVERED
	64201	ESSENT HYPERTENSION PREG/DELIV
	64211	RENAL HYPERTENSION PREG/DELIV
	64221	OTH PRE-PREG HYPERTENS/DELIV
	64231	TRANSIENT HYPERTENS PREG/DELIV
	64241	MILD/UNSPEC PREECLAMPSIA/DELIV
	64251	SEVERE PREECLAMPSIA/DELIVERED
	64261	ECLAMPSIA/DELIVERED
	64271	ECLAMPS W PRE-PREG HYPER/DELIV
	64291	HYPERTENSION NOS IN PREG/DELIV
	64301	MILD HYPEREMESIS GRAVID/DELIV
	64311	HYPEREMESIS GRAV W MET/DELIV
	64321	LATE VOMITING OF PREG/DELIVERED
	64381	OTHER VOMITING OF PREG/DELIV
	64391	UNSPEC VOMITING OF PREG/DELIV
	64421	EARLY ONSET DELIVERY/ANTEPARTUM
	64501	PROLONGED PREGNANCY/DELIVERED
	64601	PAPYRACEOUS FETUS/DELIVERED
	64611	EDEMA/EXCESS WEIGHT PREG/DELIV
	64621	RENAL DISEASE NOS PREG/DELIV
	64631	HABITUAL ABORTER/DELIVERED
	64641	PERIPHERAL NEURITIS PREG/DELIV
	64651	ASYMPT BACTERIURIA PREG/DELIV
	64661	INFECTION GU IN PREG/DELIVERED
	64671	LIVER DISORDERS IN PREG/DELIV
	64681	OTH SPEC COMPLICAT PREG/DELIV
	64691	UNSPEC COMPLICATION PREG/DELIV
	64701	SYPHILIS IN PREGNANCY/DELIVERED
	64711	GONORRHEA IN PREGNANCY/DELIV
	64721	OTH VENEREAL DIS IN PREG/DELIV
	64731	TUBERCULOSIS IN PREG/DELIVERED
	64741	MALARIA IN PREGNANCY/DELIVERED
	64751	RUBELLA IN PREGNANCY/DELIVERED
	64761	OTHER VIRAL DIS IN PREG/DELIV
	64781	OTH SPEC INFECT IN PREG/DELIV
	64791	INFECT/INFEST NOS IN PREG/DELIV
	64801	DIABETES MELLITUS IN PREG/DELIV
	64811	THYROID DYSFUNCT IN PREG/DELIV
	64821	ANEMIA IN PREGNANCY/DELIVERED
	64831	DRUG DEPENDENCE IN PREG/DELIV
	64841	MENTAL DISORDERS IN PREG/DELIV
	64851	CONGEN CV DISORD IN PREG/DELIV
	64861	OTHER CV DISEASE IN PREG/DELIV
	64871	BONE/JOINT DISORDER PREG/DELIV

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
657 DELIVERY WITHOUT POSTPARTUM COMPLICATIONS		
	64881	ABNORMAL GLUCOSE IN PREG/DELIV
	64891	OTH CONDITION EC IN PREG/DELIV
	650	DELIVERY COMPLETELY NORMAL CASE
	65101	TWIN PREGNANCY/DELIVERED
	65111	TRIPLET PREGNANCY/DELIVERED
	65121	QUADRUPLET PREGNANCY/DELIVERED
	65131	TWIN PREG W LOSS/RETENT/DELIV
	65141	TRIPLET PREG LOSS/RETENT/DELIV
	65151	QUAD PREG W LOSS/RETENT/DELIV
	65161	OTHER MULT W LOSS/RETENT/DELIV
	65181	OTHER SPEC MULT GESTATION/DELIV
	65191	UNSPEC MULTIPLE GESTATION/DELIV
	65201	UNSTABLE LIE/DELIVERED
	65211	BREECH/OTHER W CONVERT/DELIV
	65221	BREECH WITHOUT VERSION/DELIV
	65231	TRANSVERSE/OBLIQUE LIE/DELIV
	65241	FACE/BROW PRESENTATION/DELIV
	65251	HIGH HEAD AT TERM/DELIVERED
	65261	MULT GESTATION W MALPRES/DELIV
	65271	PROLAPSED ARM/DELIVERED
	65281	OTHER SPEC MALPOS/MALPRES/DELIV
	65291	UNSPEC MALPOSIT/MALPRES/DELIV
	65301	MAJ ABNORM BONY PELV NOS/DELIV
	65311	GEN CONTRACTED PELVIS/DELIVERED
	65321	INLET CONTRACTION PELVIS/DELIV
	65331	OUTLET CONTRACTION PELVIS/DELIV
	65341	FETOPELVIC DISPROPORTION/DELIV
	65351	LARGE FETUS/DISPROPORTION/DELIV
	65361	HYDROCEPH FETUS/DISPROP/DELIV
	65371	OTH FETAL ABNORM/DISPROP/DELIV
	65381	DISPROPORTION OTH ORIGIN/DELIV
	65391	UNSPEC DISPROPORTION/DELIVERED
	65401	CONGENITAL ABNORM UTERUS/DELIV
	65411	TUMOR BODY OF UTERUS/DELIVERED
	65421	PREV CESAREAN DELIVERY/DELIV
	65431	RETROVERT/INCARC UTERUS/DELIV
	65441	OTH ABNORM GRAVID UTERUS/DELIV
	65451	CERVICAL INCOMPETENCE/DELIVERED
	65461	OTHER ABNORMALITY CERVIX/DELIV
	65471	ABNORMALITY OF VAGINA/DELIVERED
	65481	ABNORMALITY OF VULVA/DELIVERED
	65491	OTH/NOS ABNORM PELV TISS/DELIV
	65501	CNS MALFORMATION IN FETUS/DELIV
	65511	CHROMOSOMAL ABNORM FETUS/DELIV
	65521	HERED DIS AFFECTING FETUS/DELIV
	65531	FETAL DAMAGE VIRAL DIS/DELIV
	65541	FETAL DAMAGE OTHER DIS/DELIV
	65551	FETAL DAMAGE D/T DRUGS/DELIV
	65561	FETAL DAMAGE RADIATION/DELIV
	65581	OTHER FETAL ABNORM NEC/DELIV
	65591	UNSPEC FETAL ABNORMALITY/DELIV
	65601	FETAL-MATERNAL HEM/DELIVERED
	65611	RHESUS ISOIMMUNIZATION/DELIV
	65621	OTHER/NOS ISOIMMUNIZATION/DELIV
	65631	FETAL DISTRESS/DELIVERED
	65641	INTRAUTERINE DEATH/DELIVERED

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
657 DELIVERY WITHOUT POSTPARTUM COMPLICATIONS		
	65651	POOR FETAL GROWTH/DELIVERED
	65661	EXCESSIVE FETAL GROWTH/DELIV
	65671	OTH PLACENTAL CONDITIONS/DELIV
	65681	OTH FETAL/PLACENTAL PROB/DELIV
	65691	FETAL/PLACENTAL PROB NOS/DELIV
	65701	POLYHYDRAMNIOS/DELIVERED
	65801	OLIGOHYDRAMNIOS/DELIVERED
	65811	PREMATURE RUPT MEMBRANES/DELIV
	65821	DELAY DELIV/RUPT MEMB NOS/DELIV
	65831	DELAYED DELIV AFTER ARM/DELIV
	65841	INFECTION AMNIOTIC CAVITY/DELIV
	65881	OTH PROB AMNIO/MEMBRANES/DELIV
	65891	UNSPEC PROBLEM AMNIO/MEMB/DELIV
	65901	FAILED MECH INDUCTION/DELIVERED
	65911	FAILED MED/NOS INDUCTION/DELIV
	65921	MAT PYREXIA IN LABOR/DELIVERED
	65931	GEN INFECTION IN LABOR/DELIV
	65941	GRAND MULTIPARITY/DELIVERED
	65951	ELDERLY PRIMIGRAVIDA/DELIVERED
	65961	OTH ADV MATERNAL AGE/DELIVERED
	65971	ABNORM FETAL HEART RATE/DELIV
	65981	OTH INDICATION INTERVENTN/DELIV
	65991	INDICAT INTERVENTION NOS/DELIV
	66001	OBSTRUCTION MALPOS FETUS/DELIV
	66011	OBSTRUCTION BONY PELVIS/DELIV
	66021	OBSTRUCT PELV SOFT TISS/DELIV
	66031	DEEP TRANSV ARR/PERS OP/DELIV
	66041	SHOULDER DYSTOCIA/DELIVERED
	66051	LOCKED TWINS/DELIVERED
	66061	FAILED TRIAL OF LABOR NOS/DELIV
	66071	FAILED FORCEPS/VACUUM NOS/DELIV
	66081	OTHER OBSTRUCTED LABOR/DELIV
	66091	UNSPEC OBSTRUCTED LABOR/DELIV
	66101	PRIMARY UTERINE INERTIA/DELIV
	66111	SECOND UTERINE INERTIA/DELIV
	66121	OTH/NOS UTERINE INERTIA/DELIV
	66131	PRECIPITATE LABOR/DELIVERED
	66141	INCOORD/PROLONG CONTRACT/DELIV
	66191	UNSPEC ABNORMALITY LABOR/DELIV
	66201	PROLONGED FIRST STAGE/DELIVERED
	66211	PROLONGED LABOR UNSPEC/DELIV
	66221	PROLONGED SECOND STAGE/DELIV
	66231	DELAYED DELIV TWIN/TRIPL/DELIV
	66301	PROLAPSE OF CORD/DELIVERED
	66311	CORD AROUND NECK/COMPRESS/DELIV
	66321	OTH CORD ENTANGL/COMPRESS/DELIV
	66331	OTH/NOS CORD ENTANGL/DELIVERED
	66341	SHORT CORD/DELIVERED
	66351	VASA PREVIA/DELIVERED
	66361	VASCULAR LESIONS OF CORD/DELIV
	66381	OTHER CORD COMPLICATIONS/DELIV
	66391	UNSPEC CORD COMPLICATION/DELIV
	66401	1ST DEGREE PERINEAL LACN/DELIV
	66411	2ND DEGREE PERINEAL LACN/DELIV
	66421	3RD DEGREE PERINEAL LACN/DELIV
	66431	4TH DEGREE PERINEAL LACN/DELIV

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
657 DELIVERY WITHOUT POSTPARTUM COMPLICATIONS		
	66441	UNSPEC PERINEAL LACERATN/DELIV
	66451	VULVAL/PERINEAL HEMATOMA/DELIV
	66481	OTHER PERIN/VULVA TRAUMA/DELIV
	66491	PERIN/VULVA TRAUMA NOS/DELIV
	66501	RUPT UTERUS BEFORE LABOR/DELIV
	66511	RUPT UTERUS DUR LABOUR/DELIV
	66531	LACERATION OF CERVIX/DELIVERED
	66541	HIGH VAGINAL LACERATION/DELIV
	66551	OTH INJURY PELVIC ORGANS/DELIV
	66561	DAMAGE PELVIC JOINTS/LIG/DELIV
	66571	PELVIC HEMATOMA/DELIVERED
	66581	OTHER SPEC OBSTET TRAUMA/DELIV
	66591	UNSPEC OBSTETRICAL TRAUMA/DELIV
	66801	PULMONARY COMPL ANESTH/DELIV
	66811	CARDIAC COMPLICAT ANESTH/DELIV
	66821	CNS COMPLICATIONS ANESTH/DELIV
	66881	OTH COMPLICATIONS ANESTH/DELIV
	66891	UNSPEC COMPLICAT ANESTH/DELIV
	66901	MATERNAL DISTRESS/DELIVERED
	66921	MAT HYPOTENSION SYNDROME/DELIV
	66941	OTH COMPL OBS SURG/PROC/DELIV
	66951	FORCEPS/VACUUM NO INDICAT/DELIV
	66961	BREECH EXTRACT NO INDICAT/DELIV
	66971	CESAREAN NO INDICATION/DELIV
	66981	OTH COMPL LABOR/DELIVERY/DELIV
	66991	COMPL LABOR/DELIVERY NOS/DELIV
	67101	VARICOSE VEINS LEGS PREG/DELIV
	67111	VARICOSE VEINS VULVA PREG/DELIV
	67121	SUPERFICIAL THROMBOPHLEB/DELIV
	67131	ANTEPARTUM DVT/DELIVERED
	67151	OTH PHLEB/THROMB IN PREG/DELIV
	67181	OTH VENOUS COMPL IN PREG/DELIV
	67191	VENOUS COMPL NOS IN PREG/DELIV
	67301	OBSTETRICAL AIR EMBOLISM/DELIV
	67311	AMNIOTIC FLUID EMBOLISM/DELIV
	67321	OBSTET BLOODCLOT EMBOLISM/DELIV
	67331	OBSTET SEPTIC EMBOLISM/DELIV
	67381	OTHER OBS PULM EMBOLISM/DELIV
	67401	PUERPERAL CV DISORDERS/DELIV
	67501	INFECTIONS NIPPLE IN PREG/DELIV
	67511	ABSCESS OF BREAST IN PREG/DELIV
	67521	NONPUR MASTITIS IN PREG/DELIV
	67581	OTH INFECTION BREAST PREG/DELIV
	67591	INFECTION BREAST NOS PREG/DELIV
	67601	RETRACTED NIPPLE IN PREG/DELIV
	67611	CRACKED NIPPLE IN PREG/DELIV
	67621	ENGORGEMENT BREAST PREG/DELIV
	67631	OTH DISORDER BREAST PREG/DELIV
	67641	FAILURE LACTATION IN PREG/DELIV
	67651	SUPPRESSED LACTATION PREG/DELIV
	67661	GALACTORRHEA IN PREG/DELIVERED
	67681	OTH DISORD LACTATION PREG/DELIV
	67691	DISORD LACTATION NOS PREG/DELIV
	677	LATE EFFECT COMPL PREG/DEL/PUER
	V270	SINGLE LIVEBORN
	V271	SINGLE STILLBIRTH

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
657 DELIVERY WITHOUT POSTPARTUM COMPLICATIONS		
	V272	TWINS BOTH LIVEBORN
	V273	TWINS ONE LIVEBORN ONE SB
	V274	TWINS BOTH STILLBORN
	V275	OTH MULT BIRTH ALL LIVEBORN
	V276	OTH MULT BIRTH SOME LIVEBORN
	V277	OTH MULT BIRTH ALL STILLBORN
	V279	UNSPECIFIED OUTCOME OF DELIVERY

ACCS CELL
658 Postpartum Conditions

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
658 POSTPARTUM CONDITIONS OUTCOMES UNCOMPLICATED		
	64204	ESSENT HYPERTENS PREG/POSTPART
	64214	RENAL HYPERTENS PREG/POSTPARTUM
	64224	OTH PRE-PREG HYPERTENS/POSTPART
	64234	TRANS HYPERTENS PREG/POSTPARTUM
	64244	MILD/NOS PREECLAMPSIA/POSTPART
	64254	SEVERE PREECLAMPSIA/POSTPARTUM
	64264	ECLAMPSIA/POSTPARTUM
	64274	ECLAMPS/PRE-PREG HYPER/POSTPART
	64294	HYPERTENS NOS IN PREG/POSTPART
	64614	EDEMA/EXCESS WEIGHT/POSTPARTUM
	64624	RENAL DISEASE NOS PREG/POSTPART
	64644	PERIPH NEURITIS PREG/POSTPARTUM
	64654	ASYMPT BACTERIURIA/POSTPARTUM
	64664	INFECTION GU IN PREG/POSTPARTUM
	64684	OTH SPEC COMPL PREG/POSTPARTUM
	64704	SYPHILIS IN PREGNANCY/POSTPART
	64714	GONORRHEA IN PREGNANCY/POSTPART
	64724	OTH VENEREAL DIS PREG/POSTPART
	64734	TUBERCULOSIS IN PREG/POSTPARTUM
	64744	MALARIA IN PREGNANCY/POSTPARTUM
	64754	RUBELLA IN PREGNANCY/POSTPARTUM
	64764	OTH VIRAL DIS IN PREG/POSTPART
	64784	OTH SPEC INFECT PREG/POSTPARTUM
	64794	INFECT/INFEST NOS PREG/POSTPART
	64804	DIABETES MELLITUS PREG/POSTPART
	64814	THYROID DYSFUNCT PREG/POSTPART
	64824	ANEMIA IN PREGNANCY/POSTPARTUM
	64834	DRUG DEPEND IN PREG/POSTPARTUM
	64844	MENTAL DISORD IN PREG/POSTPART
	64854	CONGEN CV DISORD PREG/POSTPART
	64864	OTHER CV DISEASE PREG/POSTPART
	64874	BONE/JOINT DISORD PREG/POSTPART
	64884	ABNORM GLUCOSE IN PREG/POSTPART
	64894	OTH CONDITION EC PREG/POSTPART
	65404	CONGEN ABNORM UTERUS/POSTPARTUM
	65414	TUMOR BODY OF UTERUS/POSTPARTUM
	65434	RETRO/INCARC UTERUS/POSTPARTUM
	65444	OTH ABNORM GRAV UTERUS/POSTPART
	65454	CERVICAL INCOMPETENCE/POSTPART
	65464	OTH ABNORMALITY CERVIX/POSTPART

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
658 POSTPARTUM CONDITIONS OUTCOMES UNCOMPLICATED		
	65474	ABNORMALITY OF VAGINA/POSTPART
	65484	ABNORMALITY OF VULVA/POSTPARTUM
	65494	OTH/NOS ABNORM PELV/POSTPARTUM
	66404	1ST DEGREE PERIN LACN/POSTPART
	66414	2ND DEGREE PERIN LACN/POSTPART
	66424	3RD DEGREE PERIN LACN/POSTPART
	66434	4TH DEGREE PERIN LACN/POSTPART
	66444	UNSPEC PERINEAL LACN/POSTPARTUM
	66454	VULVAL/PERIN HEMATOMA/POSTPART
	66484	OTH PERIN/VULVA TRAUMA/POSTPART
	66494	PERIN/VULVA TRAUMA NOS/POSTPART
	66524	INVERSION OF UTERUS/POSTPARTUM
	66534	LACERATION OF CERVIX/POSTPARTUM
	66544	HIGH VAGINAL LACERATN/POSTPART
	66554	OTH INJURY PELVIC ORG/POSTPART
	66564	DAMAGE PELV JOINTS/LIG/POSTPART
	66574	PELVIC HEMATOMA/POSTPARTUM
	66584	OTH SPEC OBSTET TRAUMA/POSTPART
	66594	UNSPEC OBSTET TRAUMA/POSTPARTUM
	66604	3RD STAGE HEMORRHAGE/POSTPARTUM
	66614	OTH IMMED POSTPART HEM/POSTPART
	66624	DELAY/2ND POSTPART HEM/POSTPART
	66634	POSTPART COAG DEFECTS/POSTPART
	66704	RETAIN PLACENTA NO HEM/POSTPART
	66714	RET PORTN PLAC NO HEM/POSTPART
	66804	PULMONARY COMPL ANESTH/POSTPART
	66814	CARDIAC COMPL ANESTH/POSTPARTUM
	66824	CNS COMPLICAT ANESTH/POSTPARTUM
	66884	OTH COMPLICAT ANESTH/POSTPARTUM
	66894	UNSPEC COMPL ANESTH/POSTPARTUM
	66904	MATERNAL DISTRESS/POSTPARTUM
	66924	MAT HYPOTENSION SYND/POSTPARTUM
	66934	ACUTE RF FOLL DELIV/POSTPARTUM
	66944	OTH COMPL OBS SURG/PROC/POSTPRT
	66984	OTH COMPL LABOR/DELIV/POSTPART
	66994	COMPL LABOR/DELIV NOS/POSTPART
	67004	MAJOR PUERPERAL INFECT/POSTPART
	67104	VARIC VEINS LEGS PREG/POSTPART
	67114	VARIC VEINS VULVA PREG/POSTPART
	67124	SUPERFIC THROMBOPHLEB/POSTPART
	67144	POSTPARTUM DVT/POSTPARTUM
	67154	OTH PHLEB/THROMB PREG/POSTPART
	67184	OTH VENOUS COMPL PREG/POSTPART
	67194	VENOUS COMPL NOS PREG/POSTPART
	67204	PYREXIA DUR PUERPERIUM/POSTPART
	67304	OBSTET AIR EMBOLISM/POSTPARTUM
	67314	AMNIO FLUID EMBOLISM/POSTPARTUM
	67324	OBS BLOODCLOT EMBOLISM/POSTPART
	67334	OBSTET SEPTIC EMBOLISM/POSTPART
	67384	OTH OBS PULM EMBOLISM/POSTPART
	67404	PUERPERAL CV DISORDERS/POSTPART
	67414	DISRUPT CESAREAN WOUND/POSTPART
	67424	DISRUPT PERINEAL WOUND/POSTPART
	67434	OTH COMPL OBS SURG WND/POSTPART
	67444	PLACENTAL POLYP/POSTPARTUM
	67484	OTH PUERPER COMPL NEC/POSTPART

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
658 POSTPARTUM CONDITIONS OUTCOMES UNCOMPLICATED		
	67494	PUERPERAL COMPL NOS/POSTPARTUM
	67504	INFECTIONS NIPPLE PREG/POSTPART
	67514	ABSCESS BREAST IN PREG/POSTPART
	67524	NONPUR MASTITIS PREG/POSTPARTUM
	67584	OTH INFECT BREAST PREG/POSTPART
	67594	INFECT BREAST NOS PREG/POSTPART
	67604	RETRACTED NIPPLE PREG/POSTPART
	67614	CRACKED NIPPLE IN PREG/POSTPART
	67624	ENGORGE BREAST PREG/POSTPARTUM
	67634	OTH DISORD BREAST PREG/POSTPART
	67644	FAILURE LACTATION PREG/POSTPART
	67654	SUPPRESS LACTATN PREG/POSTPART
	67664	GALACTORRHEA IN PREG/POSTPARTUM
	67684	OTH DISORD LACT PREG/POSTPARTUM
	67694	DISORD LACT NOS PREG/POSTPARTUM

ACCS CELL
659-660 Pregnancy With Abortive Outcomes Uncomplicated

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
659-660 DIAG INV & MANAGEMENT PREGNANCY WITH ABORTIVE OUTCOMES UNCOMPLICATED		
	630	HYDATIDIFORM MOLE
	631	OTH ABNORMAL PRODUCT CONCEPTION
	632	MISSED ABORTION
	6330	ABDOMINAL PREGNANCY
	6331	TUBAL PREGNANCY
	6332	OVARIAN PREGNANCY
	6338	OTHER ECTOPIC PREGNANCY
	6339	UNSPECIFIED ECTOPIC PREGNANCY
	63490	SPONT ABORT NO COMPLICAT/UNSPEC
	63491	SPONT ABORT NO COMPLICAT/INCOM
	63492	SPONT ABORT NO COMPLICAT/COMPL
	63590	LEGAL ABORT NO COMPLICAT/UNSPEC
	63591	LEGAL ABORT NO COMPLICAT/INCOM
	63592	LEGAL ABORT NO COMPLICAT/COMPL
	63790	ABORT NOS NO COMPLICAT/UNSPEC
	63791	ABORT NOS NO COMPLICAT/INCOM
	63792	ABORT NOS NO COMPLICAT/COMPL
	6389	FAIL ATTEMP ABORT NO COMPLICAT

ACCS CELL
662-663 Antepartum

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
662-663 DIAG INV & MANAGEMENT ANTEPARTUM		
	64000	THREATENED ABORTION/UNSPECIFIED
	64003	THREATENED ABORTION/ANTEPARTUM
	64080	OTH SPEC HEM EARLY PREG/UNSPEC
	64083	OTH SPEC HEM EARLY PREG/ANTEPRT
	64090	UNSPEC HEM EARLY PREG/UNSPEC
	64093	UNSPEC HEM EARLY PREG/ANTEPART

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
662-663 DIAG INV & MANAGEMENT ANTEPARTUM		
	64100	PLACENTA PREVIA NO HEM/UNSPEC
	64103	PLACENTA PREVIA NO HEM/ANTEPART
	64110	PLACENTA PREVIA W HEM/UNSPEC
	64113	PLACENTA PREVIA W HEM/ANTEPART
	64120	PREM SEPARATION PLACENTA/UNSPEC
	64123	PREM SEPARAT PLACENTA/ANTEPART
	64130	ANTEPART HEM W COAG DEF/UNSPEC
	64133	ANTEPART HEM/COAG DEF/ANTEPART
	64180	OTH ANTEPART HEMORRHAGE/UNSPEC
	64183	OTH ANTEPART HEMORRHAG/ANTEPART
	64190	UNSPEC ANTEPARTUM HEM/UNSPEC
	64193	UNSPEC ANTEPARTUM HEM/ANTEPART
	64200	ESSENT HYPERTENSION PREG/UNSPEC
	64203	ESSENT HYPERTENS PREG/ANTEPART
	64210	RENAL HYPERTENSION PREG/UNSPEC
	64213	RENAL HYPERTENS PREG/ANTEPARTUM
	64220	OTH PRE-PREG HYPERTENS/UNSPEC
	64223	OTH PRE-PREG HYPERTENS/ANTEPART
	64230	TRANSIENT HYPERTENS PREG/UNSPEC
	64233	TRANS HYPERTENS PREG/ANTEPARTUM
	64240	MILD/UNSPEC PREECLAMPSIA/UNSPEC
	64243	MILD/NOS PREECLAMPSIA/ANTEPART
	64250	SEVERE PREECLAMPSIA/UNSPECIFIED
	64253	SEVERE PREECLAMPSIA/ANTEPARTUM
	64260	ECLAMPSIA/UNSPECIFIED EPISODE
	64263	ECLAMPSIA/ANTEPARTUM
	64270	ECLAMPS W PRE-PREG HYPER/UNSPEC
	64273	ECLAMPS/PRE-PREG HYPER/ANTEPART
	64290	HYPERTENSION NOS IN PREG/UNSPEC
	64293	HYPERTENS NOS IN PREG/ANTEPART
	64300	MILD HYPEREMESIS GRAVID/UNSPEC
	64303	MILD HYPEREMESIS GRAV/ANTEPART
	64310	HYPEREMESIS GRAV W MET/UNSPEC
	64313	HYPEREMESIS GRAV W MET/ANTEPART
	64320	LATE VOMITING OF PREG/UNSPEC
	64323	LATE VOMITING OF PREG/ANTEPART
	64380	OTHER VOMITING OF PREG/UNSPEC
	64383	OTHER VOMITING OF PREG/ANTEPART
	64390	UNSPEC VOMITING OF PREG/UNSPEC
	64393	UNSPEC VOMITING PREG/ANTEPARTUM
	64400	THREATENED PREM LABOR/UNSPEC
	64403	THREATENED PREM LABOR/ANTEPART
	64410	OTHER THREATENED LABOR/UNSPEC
	64413	OTHER THREATENED LABOR/ANTEPART
	64420	EARLY ONSET OF DELIVERY/UNSPEC
	64500	PROLONGED PREGNANCY/UNSPECIFIED
	64503	PROLONGED PREGNANCY/ANTEPARTUM
	64600	PAPYRACEOUS FETUS/UNSPECIFIED
	64603	PAPYRACEOUS FETUS/ANTEPARTUM
	64610	EDEMA/EXCESS WEIGHT PREG/UNSPEC
	64613	EDEMA/EXCESS WEIGHT/ANTEPARTUM
	64620	RENAL DISEASE NOS PREG/UNSPEC
	64623	RENAL DISEASE NOS PREG/ANTEPART
	64630	HABITUAL ABORTER/UNSPECIFIED
	64633	HABITUAL ABORTER/ANTEPARTUM
	64640	PERIPHERAL NEURITIS PREG/UNSPEC

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
662-663 DIAG INV & MANAGEMENT ANTEPARTUM		
	64643	PERIPH NEURITIS PREG/ANTEPARTUM
	64650	ASYMPT BACTERIURIA PREG/UNSPEC
	64653	ASYMPT BACTERIURIA/ANTEPARTUM
	64660	INFECTION GU IN PREG/UNSPEC
	64663	INFECTION GU IN PREG/ANTEPARTUM
	64670	LIVER DISORDERS IN PREG/UNSPEC
	64673	LIVER DISORDERS PREG/ANTEPARTUM
	64680	OTH SPEC COMPLICAT PREG/UNSPEC
	64683	OTH SPEC COMPL PREG/ANTEPARTUM
	64690	UNSPEC COMPLICATION PREG/UNSPEC
	64693	UNSPEC COMPLICAT PREG/ANTEPART
	64700	SYPHILIS IN PREGNANCY/UNSPEC
	64703	SYPHILIS IN PREGNANCY/ANTEPART
	64710	GONORRHEA IN PREGNANCY/UNSPEC
	64713	GONORRHEA IN PREGNANCY/ANTEPART
	64720	OTH VENEREAL DIS IN PREG/UNSPEC
	64723	OTH VENEREAL DIS PREG/ANTEPART
	64730	TUBERCULOSIS IN PREG/UNSPEC
	64733	TUBERCULOSIS IN PREG/ANTEPARTUM
	64740	MALARIA IN PREGNANCY/UNSPEC
	64743	MALARIA IN PREGNANCY/ANTEPARTUM
	64750	RUBELLA IN PREGNANCY/UNSPEC
	64753	RUBELLA IN PREGNANCY/ANTEPARTUM
	64760	OTHER VIRAL DIS IN PREG/UNSPEC
	64763	OTH VIRAL DIS IN PREG/ANTEPART
	64780	OTH SPEC INFECT IN PREG/UNSPEC
	64783	OTH SPEC INFECT PREG/ANTEPARTUM
	64790	INFECT/INFEST NOS PREG/UNSPEC
	64793	INFECT/INFEST NOS PREG/ANTEPART
	64800	DIABETES MELLITUS PREG/UNSPEC
	64803	DIABETES MELLITUS PREG/ANTEPART
	64810	THYROID DYSFUNCT IN PREG/UNSPEC
	64813	THYROID DYSFUNCT PREG/ANTEPART
	64820	ANEMIA IN PREGNANCY/UNSPECIFIED
	64823	ANEMIA IN PREGNANCY/ANTEPARTUM
	64830	DRUG DEPENDENCE IN PREG/UNSPEC
	64833	DRUG DEPEND IN PREG/ANTEPARTUM
	64840	MENTAL DISORDERS IN PREG/UNSPEC
	64843	MENTAL DISORD IN PREG/ANTEPART
	64850	CONGEN CV DISORD IN PREG/UNSPEC
	64853	CONGEN CV DISORD PREG/ANTEPART
	64860	OTHER CV DISEASE IN PREG/UNSPEC
	64863	OTHER CV DISEASE PREG/ANTEPART
	64870	BONE/JOINT DISORDER PREG/UNSPEC
	64873	BONE/JOINT DISORD PREG/ANTEPART
	64880	ABNORMAL GLUCOSE IN PREG/UNSPEC
	64883	ABNORM GLUCOSE IN PREG/ANTEPART
	64890	OTH CONDITION EC IN PREG/UNSPEC
	64893	OTH CONDITION EC PREG/ANTEPART
	65100	TWIN PREGNANCY/UNSPEC EPISODE
	65103	TWIN PREGNANCY/ANTEPARTUM
	65110	TRIPLET PREGNANCY/UNSPECIFIED
	65113	TRIPLET PREGNANCY/ANTEPARTUM
	65120	QUADRUPLET PREGNANCY/UNSPEC
	65123	QUADRUPLET PREGNANCY/ANTEPARTUM
	65130	TWIN PREG W LOSS/RETENT/UNSPEC

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
662-663 DIAG INV & MANAGEMENT ANTEPARTUM		
	65133	TWIN PREG LOSS/RETENT/ANTEPART
	65140	TRIPLET PREG LOSS/RETENT/UNSPEC
	65143	TRIPL PREG LOSS/RETENT/ANTEPART
	65150	QUAD PREG W LOSS/RETENT/UNSPEC
	65153	QUAD PREG LOSS/RETENT/ANTEPART
	65160	OTHER MULT W LOSS/RETENT/UNSPEC
	65163	OTH MULT W LOSS/RETENT/ANTEPART
	65180	OTH SPEC MULT GESTATION/UNSPEC
	65183	OTH SPEC MULT GESTATN/ANTEPART
	65190	UNSPEC MULT GESTATION/UNSPEC
	65193	UNSPEC MULT GESTATION/ANTEPART
	65200	UNSTABLE LIE/UNSPEC EPISODE
	65203	UNSTABLE LIE/ANTEPARTUM
	65210	BREECH/OTHER W CONVERT/UNSPEC
	65213	BREECH/OTHER W CONVERT/ANTEPART
	65220	BREECH WITHOUT VERSION/UNSPEC
	65223	BREECH WITHOUT VERION/ANTEPART
	65230	TRANSVERSE/OBLIQUE LIE/UNSPEC
	65233	TRANSVERSE/OBLIQUE LIE/ANTEPART
	65240	FACE/BROW PRESENTATION/UNSPEC
	65243	FACE/BROW PRESENTATION/ANTEPART
	65250	HIGH HEAD AT TERM/UNSPECIFIED
	65253	HIGH HEAD AT TERM/ANTEPARTUM
	65260	MULT GESTATION W MALPRES/UNSPEC
	65263	MULT GESTATN W MALPRES/ANTEPART
	65270	PROLAPSED ARM/UNSPEC EPISODE
	65273	PROLAPSED ARM/ANTEPARTUM
	65280	OTH SPEC MALPOS/MALPRES/UNSPEC
	65283	OTHER MALPOSIT/MALPRES/ANTEPART
	65290	UNSPEC MALPOSIT/MALPRES/UNSPEC
	65293	UNSPEC MALPOS/MALPRES/ANTEPART
	65300	MAJ ABNORM BONY PELV NOS/UNSPEC
	65303	MAJ ABNORM BONY PELV/ANTEPARTUM
	65310	GEN CONTRACTED PELVIS/UNSPEC
	65313	GEN CONTRACTED PELVIS/ANTEPART
	65320	INLET CONTRACTION PELVIS/UNSPEC
	65323	INLET CONTRACTN PELVIS/ANTEPART
	65330	OUTLET CONTRACTN PELVIS/UNSPEC
	65333	OUTLET CONTRACTN PELV/ANTEPART
	65340	FETOPELVIC DISPROPORTION/UNSPEC
	65343	FETOPELVIC DISPROPORTN/ANTEPART
	65350	LARGE FETUS/DISPROPORTN/UNSPEC
	65353	LARGE FETUS/DISPROPORT/ANTEPART
	65360	HYDROCEPH FETUS/DISPROP/UNSPEC
	65363	HYDROCEPH FET/DISPROP/ANTEPART
	65370	OTH FETAL ABNORM/DISPROP/UNSPEC
	65373	OTH FET ABNORM/DISPROP/ANTEPART
	65380	DISPROPORTION OTH ORIGIN/UNSPEC
	65383	DISPROPORTION OTH ORIG/ANTEPART
	65390	UNSPEC DISPROPORTION/UNSPEC
	65393	UNSPEC DISPROPORTION/ANTEPARTUM
	65400	CONGENITAL ABNORM UTERUS/UNSPEC
	65403	CONGEN ABNORM UTERUS/ANTEPARTUM
	65410	TUMOR OF BODY OF UTERUS/UNSPEC
	65413	TUMOR BODY OF UTERUS/ANTEPARTUM
	65420	PREV CESAREAN DELIVERY/UNSPEC

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
662-663 DIAG INV & MANAGEMENT ANTEPARTUM		
	65423	PREV CESAREAN DELIVERY/ANTEPART
	65430	RETROVERT/INCARC UTERUS/UNSPEC
	65433	RETRO/INCARC UTERUS/ANTEPARTUM
	65440	OTH ABNORM GRAVID UTERUS/UNSPEC
	65443	OTH ABNORM GRAV UTERUS/ANTEPART
	65450	CERVICAL INCOMPETENCE/UNSPEC
	65453	CERVICAL INCOMPETENCE/ANTEPART
	65460	OTHER ABNORMALITY CERVIX/UNSPEC
	65463	OTH ABNORMALITY CERVIX/ANTEPART
	65470	ABNORMALITY OF VAGINA/UNSPEC
	65473	ABNORMALITY OF VAGINA/ANTEPART
	65480	ABNORMALITY OF VULVA/UNSPEC
	65483	ABNORMALITY OF VULVA/ANTEPARTUM
	65490	OTH/NOS ABNORM PELV TISS/UNSPEC
	65493	OTH/NOS ABNORM PELV/ANTEPARTUM
	65500	CNS MALFORMATION FETUS/UNSPEC
	65503	CNS MALFORMATION FETUS/ANTEPART
	65510	CHROMOSOMAL ABNORM FETUS/UNSPEC
	65513	CHROMOSOMAL ABNORM FET/ANTEPART
	65520	HERED DIS AFFECT FETUS/UNSPEC
	65523	HERED DIS AFFECT FETUS/ANTEPART
	65530	FETAL DAMAGE VIRAL DIS/UNSPEC
	65533	FETAL DAMAGE VIRAL DIS/ANTEPART
	65540	FETAL DAMAGE OTHER DIS/UNSPEC
	65543	FETAL DAMAGE OTHER DIS/ANTEPART
	65550	FETAL DAMAGE D/T DRUGS/UNSPEC
	65553	FETAL DAMAGE D/T DRUGS/ANTEPART
	65560	FETAL DAMAGE RADIATION/UNSPEC
	65563	FETAL DAMAGE RADIATION/ANTEPART
	65570	DECREASED FETAL MOVEMENTS/UNSPEC
	65571	DECREASED FETAL MOVEMENTS/DELIV
	65573	DECREASED FETAL MOVEMENTS/ANTEPARTUM
	65580	OTHER FETAL ABNORM NEC/UNSPEC
	65583	OTHER FETAL ABNORM NEC/ANTEPART
	65590	UNSPEC FETAL ABNORMALITY/UNSPEC
	65593	UNSPEC FETAL ABNORM/ANTEPARTUM
	65600	FETAL-MATERNAL HEM/UNSPECIFIED
	65603	FETAL-MATERNAL HEM/ANTEPARTUM
	65610	RHESUS ISOIMMUNIZATION/UNSPEC
	65613	RHESUS ISOIMMUNIZATION/ANTEPART
	65620	OTH/NOS ISOIMMUNIZATION/UNSPEC
	65623	OTH/NOS ISOIMMUNIZATN/ANTEPART
	65630	FETAL DISTRESS/UNSPEC EPISODE
	65633	FETAL DISTRESS/ANTEPARTUM
	65640	INTRAUTERINE DEATH/UNSPECIFIED
	65643	INTRAUTERINE DEATH/ANTEPARTUM
	65650	POOR FETAL GROWTH/UNSPECIFIED
	65653	POOR FETAL GROWTH/ANTEPARTUM
	65660	EXCESSIVE FETAL GROWTH/UNSPEC
	65663	EXCESSIVE FETAL GROWTH/ANTEPART
	65670	OTH PLACENTAL CONDITIONS/UNSPEC
	65673	OTHER PLACENTAL COND/ANTEPARTUM
	65680	OTH FETAL/PLACENTAL PROB/UNSPEC
	65683	OTH FET/PLACENTAL PROB/ANTEPART
	65690	FETAL/PLACENTAL PROB NOS/UNSPEC
	65693	FET/PLACENTAL PROB NOS/ANTEPART

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
662-663 DIAG INV & MANAGEMENT ANTEPARTUM		
	65700	POLYHYDRAMNIOS/UNSPEC EPISODE
	65703	POLYHYDRAMNIOS/ANTEPARTUM
	65800	OLIGOHYDRAMNIOS/UNSPEC EPISODE
	65803	OLIGOHYDRAMNIOS/ANTEPARTUM
	65810	PREMATURE RUPT MEMBRANES/UNSPEC
	65813	PREMATURE RUPT MEMB/ANTEPARTUM
	65820	DELAY DEL/RUPT MEMB NOS/UNSPEC
	65823	DELAY DEL/RUPT MEMB NOS/ANTEPRT
	65830	DELAYED DELIV AFTER ARM/UNSPEC
	65833	DELAY DELIV AFTER ARM/ANTEPART
	65840	INFECT AMNIOTIC CAVITY/UNSPEC
	65843	INFECT AMNIOTIC CAVITY/ANTEPART
	65880	OTH PROB AMNIO/MEMBRANES/UNSPEC
	65883	OTH PROB AMNIO/MEMB/ANTEPARTUM
	65890	UNSPEC PROB AMNIO/MEMB/UNSPEC
	65893	UNSPEC PROB AMNIO/MEMB/ANTEPART
	65900	FAILED MECH INDUCTION/UNSPEC
	65903	FAILED MECH INDUCTION/ANTEPART
	65910	FAILED MED/NOS INDUCTION/UNSPEC
	65913	FAILED MED/NOS INDUCTN/ANTEPART
	65920	MAT PYREXIA IN LABOR/UNSPEC
	65923	MAT PYREXIA IN LABOR/ANTEPARTUM
	65930	GEN INFECTION IN LABOR/UNSPEC
	65933	GEN INFECTION IN LABOR/ANTEPART
	65940	GRAND MULTIPARITY/UNSPECIFIED
	65943	GRAND MULTIPARITY/ANTEPARTUM
	65950	ELDERLY PRIMIGRAVIDA/UNSPEC
	65953	ELDERLY PRIMIGRAVIDA/ANTEPARTUM
	65960	OTH ADV MATERNAL AGE/UNSPEC
	65963	OTH ADV MATERNAL AGE/ANTEPARTUM
	65970	ABNORM FETAL HEART RATE UNS
	65973	ABNORM FETAL HEART RATE/ANTEPART
	65980	OTH INDICAT INTERVENTN/UNSPEC
	65983	OTH INDICAT INTERVENTN/ANTEPART
	65990	INDICAT INTERVENTION NOS/UNSPEC
	65993	INDICAT INTERVENTN NOS/ANTEPART
	66000	OBSTRUCTION MALPOS FETUS/UNSPEC
	66003	OBSTRUCT MALPOS FETUS/ANTEPART
	66010	OBSTRUCTION BONY PELVIS/UNSPEC
	66013	OBSTRUCTION BONY PELV/ANTEPART
	66020	OBSTRUCT PELV SOFT TISS/UNSPEC
	66023	OBSTRUCT PELV SFT TISS/ANTEPART
	66030	DEEP TRANSV ARR/PERS OP/UNSPEC
	66033	DEEP TRANSV ARR/PERS OP/ANTEPRT
	66040	SHOULDER DYSTOCIA/UNSPECIFIED
	66043	SHOULDER DYSTOCIA/ANTEPARTUM
	66050	LOCKED TWINS/UNSPEC EPISODE
	66053	LOCKED TWINS/ANTEPARTUM
	66060	FAILED TRIAL LABOR NOS/UNSPEC
	66063	FAILED TRIAL LABOR NOS/ANTEPART
	66070	FAILED FORCEP/VACUUM NOS/UNSPEC
	66073	FAIL FORCEP/VACUUM NOS/ANTEPART
	66080	OTHER OBSTRUCTED LABOR/UNSPEC
	66083	OTHER OBSTRUCTED LABOR/ANTEPART
	66090	UNSPEC OBSTRUCTED LABOR/UNSPEC
	66093	UNSPEC OBSTRUCT LABOR/ANTEPART

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
662-663 DIAG INV & MANAGEMENT ANTEPARTUM		
	66100	PRIMARY UTERINE INERTIA/UNSPEC
	66103	PRIMARY UTERINE INERTIA/ANTEPRT
	66110	SECOND UTERINE INERTIA/UNSPEC
	66113	SECOND UTERINE INERTIA/ANTEPART
	66120	OTH/NOS UTERINE INERTIA/UNSPEC
	66123	OTH/NOS UTERINE INERTIA/ANTEPRT
	66130	PRECIPITATE LABOR/UNSPECIFIED
	66133	PRECIPITATE LABOR/ANTEPARTUM
	66140	INCOORD/PROLONG CONTRACT/UNSPEC
	66143	INCOORD/PROLONG CONTRCT/ANTEPRT
	66190	UNSPEC ABNORMALITY LABOR/UNSPEC
	66193	UNSPEC ABNORMAL LABOR/ANTEPART
	66200	PROLONGED FIRST STAGE/UNSPEC
	66203	PROLONGED FIRST STAGE/ANTEPART
	66210	PROLONGED LABOR UNSPEC/UNSPEC
	66213	PROLONGED LABOR UNSPEC/ANTEPART
	66220	PROLONGED SECOND STAGE/UNSPEC
	66223	PROLONGED SECOND STAGE/ANTEPART
	66230	DELAYED DELIV TWIN/TRIPL/UNSPEC
	66233	DELAY DELIV TWIN/TRIPL/ANTEPART
	66300	PROLAPSE OF CORD/UNSPEC EPISODE
	66303	PROLAPSE OF CORD/ANTEPARTUM
	66310	CORD AROUND NECK/COMPRES/UNSPEC
	66313	CORD AROUND NECK/COMPR/ANTEPART
	66320	OTH CORD ENTANGL/COMPRES/UNSPEC
	66323	OTH CORD ENTANGL/COMPR/ANTEPART
	66330	OTH/NOS CORD ENTANGL/UNSPEC
	66333	OTH/NOS CORD ENTANGL/ANTEPARTUM
	66340	SHORT CORD/UNSPECIFIED EPISODE
	66343	SHORT CORD/ANTEPARTUM
	66350	VASA PREVIA/UNSPECIFIED EPISODE
	66353	VASA PREVIA/ANTEPARTUM
	66360	VASCULAR LESIONS OF CORD/UNSPEC
	66363	VASCULAR LESIONS CORD/ANTEPART
	66380	OTHER CORD COMPLICATIONS/UNSPEC
	66383	OTH CORD COMPLICATIONS/ANTEPART
	66390	UNSPEC CORD COMPLICATION/UNSPEC
	66393	UNSPEC CORD COMPLICAT/ANTEPART
	66400	1ST DEGREE PERINEAL LACN/UNSPEC
	66410	2ND DEGREE PERINEAL LACN/UNSPEC
	66420	3RD DEGREE PERINEAL LACN/UNSPEC
	66430	4TH DEGREE PERINEAL LACN/UNSPEC
	66440	UNSPEC PERINEAL LACERATN/UNSPEC
	66450	VULVAL/PERINEAL HEMATOMA/UNSPEC
	66480	OTHER PERIN/VULVA TRAUMA/UNSPEC
	66490	PERIN/VULVA TRAUMA NOS/UNSPEC
	66500	RUPT UTERUS BEFORE LABOR/UNSPEC
	66503	RUPT UTERUS BEF LABOR/ANTEPART
	66510	RUPT UTERUS DUR LABOUR/UNSPEC
	66520	INVERSION OF UTERUS/UNSPECIFIED
	66530	LACERATION OF CERVIX/UNSPEC
	66540	HIGH VAGINAL LACERATION/UNSPEC
	66550	OTH INJURY PELVIC ORGANS/UNSPEC
	66560	DAMAGE PELVIC JOINTS/LIG/UNSPEC
	66570	PELVIC HEMATOMA/UNSPEC EPISODE
	66580	OTHER SPEC OBSTET TRAUMA/UNSPEC

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
662-663 DIAG INV & MANAGEMENT ANTEPARTUM		
	66583	OTH SPEC OBSTET TRAUMA/ANTEPART
	66590	UNSPEC OBSTET TRAUMA/UNSPEC
	66593	UNSPEC OBSTET TRAUMA/ANTEPARTUM
	66600	3RD STAGE HEMORRHAGE/UNSPEC
	66610	OTHER IMMED POSTPART HEM/UNSPEC
	66620	DELAYED/2ND POSTPART HEM/UNSPEC
	66630	POSTPARTUM COAG DEFECTS/UNSPEC
	66700	RETAINED PLACENTA NO HEM/UNSPEC
	66710	RETAIN PORTN PLAC NO HEM/UNSPEC
	66800	PULMONARY COMPL ANESTH/UNSPEC
	66803	PULMONARY COMPL ANESTH/ANTEPART
	66810	CARDIAC COMPLICAT ANESTH/UNSPEC
	66813	CARDIAC COMPL ANESTH/ANTEPARTUM
	66820	CNS COMPLICATIONS ANESTH/UNSPEC
	66823	CNS COMPLICAT ANESTH/ANTEPARTUM
	66880	OTH COMPLICATIONS ANESTH/UNSPEC
	66883	OTH COMPLICAT ANESTH/ANTEPARTUM
	66890	UNSPEC COMPLICAT ANESTH/UNSPEC
	66893	UNSPEC COMPL ANESTH/ANTEPARTUM
	66900	MATERNAL DISTRESS/UNSPECIFIED
	66903	MATERNAL DISTRESS/ANTEPARTUM
	66920	MAT HYPOTENSION SYNDROME/UNSPEC
	66923	MAT HYPOTENSION SYND/ANTEPARTUM
	66930	ACUTE RF FOLL LAB/DELIV/UNSPEC
	66940	OTH COMPL OBS SURG/PROC/UNSPEC
	66943	OTH COMPL OBS SURG/PROC/ANTEPRT
	66950	FORCEP/VACUUM NO INDICAT/UNSPEC
	66960	BREECH EXTRC NO INDICAT/UNSPEC
	66970	CESAREAN NO INDICATION/UNSPEC
	66980	OTH COMPL LABOR/DELIVERY/UNSPEC
	66983	OTH COMPL LABOR/DELIV/ANTEPART
	66990	COMPL LABOR/DELIVERY NOS/UNSPEC
	66993	COMPL LABOR/DELIV NOS/ANTEPART
	67000	MAJOR PUERPERAL INFECT/UNSPEC
	67100	VARICOSE VEINS LEGS PREG/UNSPEC
	67103	VARIC VEINS LEGS PREG/ANTEPART
	67110	VARIC VEINS VULVA PREG/UNSPEC
	67113	VARIC VEINS VULVA PREG/ANTEPART
	67120	SUPERFICIAL THROMBOPHLEB/UNSPEC
	67123	SUPERFIC THROMBOPHLEB/ANTEPART
	67130	ANTEPARTUM DVT/UNSPEC EPISODE
	67133	ANTEPARTUM DVT/ANTEPARTUM
	67140	POSTPARTUM DVT/UNSPEC EPISODE
	67150	OTH PHLEB/THROMB IN PREG/UNSPEC
	67153	OTH PHLEB/THROMB PREG/ANTEPART
	67180	OTH VENOUS COMPL IN PREG/UNSPEC
	67183	OTH VENOUS COMPL PREG/ANTEPART
	67190	VENOUS COMPL NOS IN PREG/UNSPEC
	67193	VENOUS COMPL NOS PREG/ANTEPART
	67200	PYREXIA DUR PUERPERIUM/UNSPEC
	67300	OBSTETRICAL AIR EMBOLISM/UNSPEC
	67303	OBSTET AIR EMBOLISM/ANTEPARTUM
	67310	AMNIOTIC FLUID EMBOLISM/UNSPEC
	67313	AMNIO FLUID EMBOLISM/ANTEPARTUM
	67320	OBS BLOODCLOT EMBOLISM/UNSPEC
	67323	OBS BLOODCLOT EMBOLISM/ANTEPART

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
662-663 DIAG INV & MANAGEMENT ANTEPARTUM		
	67330	OBSTET SEPTIC EMBOLISM/UNSPEC
	67333	OBSTET SEPTIC EMBOLISM/ANTEPART
	67380	OTHER OBS PULM EMBOLISM/UNSPEC
	67383	OTH OBS PULM EMBOLISM/ANTEPART
	67400	PUERPERAL CV DISORDERS/UNSPEC
	67403	PUERPERAL CV DISORDERS/ANTEPART
	67410	DISRUPT CESAREAN WOUND/UNSPEC
	67420	DISRUPT PERINEAL WOUND/UNSPEC
	67430	OTH COMPL OBS SURG WOUND/UNSPEC
	67440	PLACENTAL POLYP/UNSPEC EPISODE
	67480	OTH PUERPERAL COMPL NEC/UNSPEC
	67490	PUERPERAL COMPL NOS/UNSPECIFIED
	67500	INFECTION NIPPLE IN PREG/UNSPEC
	67503	INFECTIONS NIPPLE PREG/ANTEPART
	67510	ABSCESS BREAST IN PREG/UNSPEC
	67513	ABSCESS BREAST IN PREG/ANTEPART
	67520	NONPUR MASTITIS IN PREG/UNSPEC
	67523	NONPUR MASTITIS PREG/ANTEPARTUM
	67580	OTH INFECT BREAST PREG/UNSPEC
	67583	OTH INFECT BREAST PREG/ANTEPART
	67590	INFECT BREAST NOS PREG/UNSPEC
	67593	INFECT BREAST NOS PREG/ANTEPART
	67600	RETRACTED NIPPLE IN PREG/UNSPEC
	67603	RETRACTED NIPPLE PREG/ANTEPART
	67610	CRACKED NIPPLE IN PREG/UNSPEC
	67613	CRACKED NIPPLE IN PREG/ANTEPART
	67620	ENGORGEMENT BREAST PREG/UNSPEC
	67623	ENGORGE BREAST PREG/ANTEPARTUM
	67630	OTH DISORDER BREAST PREG/UNSPEC
	67633	OTH DISORD BREAST PREG/ANTEPART
	67640	FAILURE LACTATION PREG/UNSPEC
	67643	FAILURE LACTATION PREG/ANTEPART
	67650	SUPPRESS LACTATION PREG/UNSPEC
	67653	SUPPRESS LACTATN PREG/ANTEPART
	67660	GALACTORRHEA IN PREG/UNSPEC
	67663	GALACTORRHEA IN PREG/ANTEPARTUM
	67680	OTH DISORD LACTATN PREG/UNSPEC
	67683	OTH DISORD LACT PREG/ANTEPARTUM
	67690	DISORD LACTATN NOS PREG/UNSPEC
	67693	DISORD LACT NOS PREG/ANTEPARTUM
	7923	ABNORM FINDINGS AMNIOTIC FLUID
	7965	ABNORMAL FINDING ON ANTENATAL SCREENING
	V230	SUPERVIS PREG W HX INFERTILITY
	V231	SUPERVIS PREG W HX TROPH DIS
	V232	SUPERVIS PREG WITH HX ABORTION
	V233	GRAND MULTIPARITY
	V234	PREGNANCY W OTHER POOR OBS HX
	V235	PREG W OTH POOR REPRODUCTIVE HX
	V237	INSUFFICIENT PRENATAL CARE
	V2381	SUPERVIS HR PREG/ELD PRIMIGRAV
	V2382	SUPERVIS HR PREG/ELD MULTIGRAV
	V2383	SUPERVIS HR PREG/YNG PRIMIGRAV
	V2384	SUPERVIS HR PREG/YNG MULTIGRAV
	V2389	SUPERVIS OTHER HIGH RISK PREG
	V239	SUPERVIS UNSPEC HIGH RISK PREG
	V280	SCREEN CHROMOSOMAL ANOM AMNIO

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
662-663 DIAG INV & MANAGEMENT ANTEPARTUM		
	V281	SCREEN RAIS ALPHAFETOPROT AMNIO
	V282	OTH SCREEN AMNIOCENTESIS BASED
	V283	SCREEN MALFORM BY ULTRASONICS
	V284	SCREEN FET GROW RETARD ULTRASON
	V285	ANTENAT SCREENING ISOIMMUNIZATN
	V286	ANTENATAL SCREENING FOR STREPTOCOCCUS B
	V288	OTHER SPEC ANTENATAL SCREENING
	V289	UNSPECIFIED ANTENATAL SCREENING

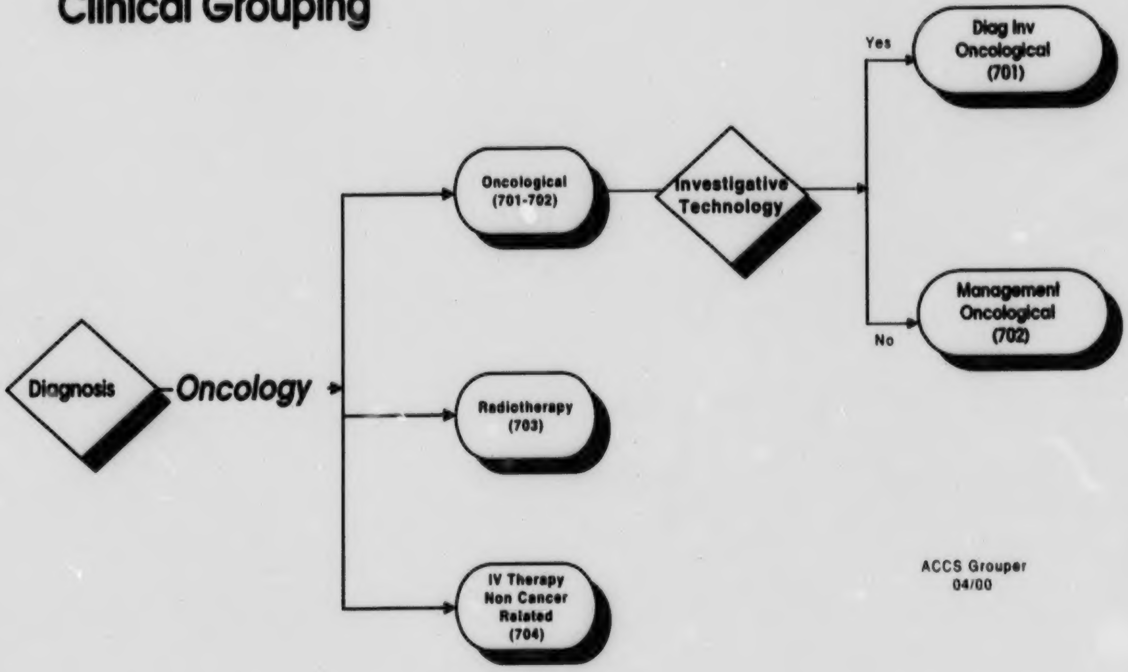
ACCS CELL
664-665 Pregnancy With Abortive Outcomes Complicated

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
664-665 DIAG INV & MANAGEMENT PREGNANCY WITH ABORTIVE OUTCOMES COMPLICATED		
	63400	SPONT ABORT W PELV INFECT/NOS
	63401	SPONT ABORT W PELV INFECT/INCOM
	63402	SPONT ABORT W PELV INFECT/COMPL
	63410	SPONT ABORT W HEMORRHAGE/UNSPEC
	63411	SPONT ABORT W HEMORRHAGE/INCOM
	63412	SPONT ABORT W HEMORRHAGE/COMPL
	63420	SPONT ABORT W PELV DAMAGE/NOS
	63421	SPONT ABORT W PELV DAMAGE/INCOM
	63422	SPONT ABORT W PELV DAMAGE/COMPL
	63430	SPONT ABORT W RENAL FAIL/UNSPEC
	63431	SPONT ABORT W RENAL FAIL/INCOM
	63432	SPONT ABORT W RENAL FAIL/COMPL
	63440	SPONT ABORT W MET DISORD/UNSPEC
	63441	SPONT ABORT W MET DISORD/INCOM
	63442	SPONT ABORT W MET DISORD/COMPL
	63460	SPONT ABORT W EMBOLISM/UNSPEC
	63461	SPONT ABORT W EMBOLISM/INCOM
	63462	SPONT ABORT W EMBOLISM/COMPLETE
	63470	SPONT ABORT W OTH COMPL/UNSPEC
	63471	SPONT ABORT W OTH COMPL/INCOM
	63472	SPONT ABORT W OTH COMPL/COMPLET
	63480	SPONT ABORT W COMPL NOS/UNSPEC
	63481	SPONT ABORT W COMPL NOS/INCOM
	63482	SPONT ABORT W COMPL NOS/COMPLET
	63500	LEGAL ABORT W PELV INFECT/NOS
	63501	LEGAL ABORT W PELV INFECT/INCOM
	63502	LEGAL ABORT W PELV INFECT/COMPL
	63510	LEGAL ABORT W HEMORRHAGE/UNSPEC
	63511	LEGAL ABORT W HEMORRHAGE/INCOM
	63512	LEGAL ABORT W HEMORRHAGE/COMPL
	63520	LEGAL ABORT W PELV DAMAGE/NOS
	63521	LEGAL ABORT W PELV DAMAGE/INCOM
	63522	LEGAL ABORT W PELV DAMAGE/COMPL
	63530	LEGAL ABORT W RENAL FAIL/UNSPEC
	63531	LEGAL ABORT W RENAL FAIL/INCOM
	63532	LEGAL ABORT W RENAL FAIL/COMPL
	63540	LEGAL ABORT W MET DISORD/UNSPEC
	63541	LEGAL ABORT W MET DISORD/INCOM

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
664-665 DIAG INV & MANAGEMENT PREGNANCY WITH ABORTIVE OUTCOMES COMPLICATED		
	63542	LEGAL ABORT W MET DISORD/COMPL
	63560	LEGAL ABORT W EMBOLISM/UNSPEC
	63561	LEGAL ABORT W EMBOLISM/INCOM
	63562	LEGAL ABORT W EMBOLISM/COMPLETE
	63570	LEGAL ABORT W OTH COMPL/UNSPEC
	63571	LEGAL ABORT W OTH COMPL/INCOM
	63572	LEGAL ABORT W OTH COMPL/COMPLET
	63580	LEGAL ABORT W COMPL NOS/UNSPEC
	63581	LEGAL ABORT W COMPL NOS/INCOM
	63582	LEGAL ABORT W COMPL NOS/COMPLET
	63600	ILLEG ABORT W PELV INFECT/NOS
	63601	ILLEG ABORT W PELV INFECT/INCOM
	63602	ILLEG ABORT W PELV INFECT/COMPL
	63610	ILLEG ABORT W HEMORRHAGE/UNSPEC
	63611	ILLEG ABORT W HEMORRHAGE/INCOM
	63612	ILLEG ABORT W HEMORRHAGE/COMPL
	63620	ILLEG ABORT W PELV DAMAGE/NOS
	63621	ILLEG ABORT W PELV DAMAGE/INCOM
	63622	ILLEG ABORT W PELV DAMAGE/COMPL
	63630	ILLEG ABORT W RENAL FAIL/UNSPEC
	63631	ILLEG ABORT W RENAL FAIL/INCOM
	63632	ILLEG ABORT W RENAL FAIL/COMPL
	63640	ILLEG ABORT W MET DISORD/UNSPEC
	63641	ILLEG ABORT W MET DISORD/INCOM
	63642	ILLEG ABORT W MET DISORD/COMPL
	63660	ILLEG ABORT W EMBOLISM/UNSPEC
	63661	ILLEG ABORT W EMBOLISM/INCOM
	63662	ILLEG ABORT W EMBOLISM/COMPLETE
	63670	ILLEG ABORT W OTH COMPL/UNSPEC
	63671	ILLEG ABORT W OTH COMPL/INCOM
	63672	ILLEG ABORT W OTH COMPL/COMPLET
	63680	ILLEG ABORT W COMPL NOS/UNSPEC
	63681	ILLEG ABORT W COMPL NOS/INCOM
	63682	ILLEG ABORT W COMPL NOS/COMPLET
	63690	ILLEG ABORT NO COMPLICAT/UNSPEC
	63691	ILLEG ABORT NO COMPLICAT/INCOM
	63692	ILLEG ABORT NO COMPLICAT/COMPL
	63700	ABORT NOS W PELV INFECT/NOS
	63701	ABORT NOS W PELV INFECT/INCOM
	63702	ABORT NOS W PELV INFECT/COMPL
	63710	ABORT NOS W HEMORRHAGE/UNSPEC
	63711	ABORT NOS W HEMORRHAGE/INCOM
	63712	ABORT NOS W HEMORRHAGE/COMPL
	63720	ABORT NOS W PELV DAMAGE/NOS
	63721	ABORT NOS W PELV DAMAGE/INCOM
	63722	ABORT NOS W PELV DAMAGE/COMPL
	63730	ABORT NOS W RENAL FAIL/UNSPEC
	63731	ABORT NOS W RENAL FAIL/INCOM
	63732	ABORT NOS W RENAL FAIL/COMPL
	63740	ABORT NOS W MET DISORD/UNSPEC
	63741	ABORT NOS W MET DISORD/INCOM
	63742	ABORT NOS W MET DISORD/COMPL
	63760	ABORT NOS W EMBOLISM/UNSPEC
	63761	ABORT NOS W EMBOLISM/INCOM
	63762	ABORT NOS W EMBOLISM/COMPLETE
	63770	ABORT NOS W OTH COMPL/UNSPEC

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
684-685 DIAG INV & MANAGEMENT PREGNANCY WITH ABORTIVE OUTCOMES COMPLICATED		
	63771	ABORT NOS W OTH COMPL/INCOM
	63772	ABORT NOS W OTH COMPL/COMPLET
	63780	ABORT NOS W COMPL NOS/UNSPEC
	63781	ABORT NOS W COMPL NOS/INCOM
	63782	ABORT NOS W COMPL NOS/COMPLET
	6380	FAIL ATTEMP ABORT W PELV INFECT
	6381	FAIL ATTEMP ABORT W HEMORRHAGE
	6382	FAIL ATTEMP ABORT W PELV DAMAGE
	6383	FAIL ATTEMP ABORT W RENAL FAIL
	6384	FAIL ATTEMP ABORT W MET DISORD
	6385	FAILED ATTEMPTED ABORT W SHOCK
	6386	FAIL ATTEMPTED ABORT W EMBOLISM
	6387	FAIL ATTEMP ABORT W OTHER COMPL
	6388	FAIL ATTEMP ABORT W COMPL NOS
	6390	GEN/PELV INFECT AFT ABORT/ECTOP
	6391	HEMORRHAGE AFT ABORTION/ECTOPIC
	6392	PELVIC DAMAGE AFT ABORT/ECTOPIC
	6393	RENAL FAILURE AFT ABORT/ECTOPIC
	6394	MET DISORDER AFT ABORT/ECTOPIC
	6396	EMBOLISM AFTER ABORTION/ECTOPIC
	6398	OTH SPEC COMPL AFT ABORT/ECTOP
	6399	UNSPEC COMPL AFT ABORT/ECTOPIC

Oncology
Clinical Grouping


Diagnosis
Oncology
Oncological (701-702)
Investigative Technology
Yes
Diag Inv Oncological (701)
No
Management Oncological (702)
Radiotherapy (703)
IV Therapy Non Cancer Related (704)

ACCS Grouper
04/00

ACCS CELL
701-702 Oncological

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
701-702 DIAG INV & MANAGEMENT ONCOLOGICAL		
	1400	MAL NEO UPPER LIP VERMIL BORDER
	1401	MAL NEO LOWER LIP VERMIL BORDER
	1403	MAL NEO UPPER LIP INNER ASPECT
	1404	MAL NEO LOWER LIP INNER ASPECT
	1405	MAL NEO LIP UNSPEC INNER ASPECT
	1406	MAL NEOPLASM COMMISSURE OF LIP
	1408	MAL NEOPLASM OTH SITES OF LIP
	1409	MAL NEO LIP UNSPEC VERMIL BORDR
	1410	MALIGNANT NEOPLASM BASE TONGUE
	1411	MAL NEO DORSAL SURFACE TONGUE
	1412	MAL NEO TIP/LAT BORDER TONGUE
	1413	MAL NEO VENTRAL SURFACE TONGUE
	1414	MAL NEO ANT 2/3 TONGUE UNSPEC
	1415	MAL NEOPLASM JUNCTIONAL ZONE
	1416	MAL NEOPLASM LINGUAL TONSIL
	1418	MAL NEOPLASM OTH SITES TONGUE
	1419	UNSPEC MAL NEOPLASM TONGUE
	1420	MAL NEOPLASM PAROTID GLAND
	1421	MAL NEO SUBMANDIBULAR GLAND
	1422	MAL NEOPLASM SUBLINGUAL GLAND
	1428	MAL NEO OTH MAJ SALIVARY GLANDS
	1429	MAL NEO UNSPEC MAJ SALIVARY GL
	1430	MALIGNANT NEOPLASM UPPER GUM
	1431	MALIGNANT NEOPLASM LOWER GUM
	1438	MAL NEOPLASM OTH SITES GUM
	1439	UNSPEC MALIGNANT NEOPLASM GUM
	1440	MAL NEO ANT PORTION FLOOR MOUTH
	1441	MAL NEO LAT PORTION FLOOR MOUTH
	1448	MAL NEO FLOOR MOUTH OTH SITES
	1449	MAL NEO FLOOR MOUTH UNSPEC PART
	1450	MALIGNANT NEOPLASM CHEEK MUCOSA
	1451	MAL NEOPLASM VESTIBULE OF MOUTH
	1452	MALIGNANT NEOPLASM HARD PALATE
	1453	MALIGNANT NEOPLASM SOFT PALATE
	1454	MALIGNANT NEOPLASM UVULA
	1455	MAL NEOPLASM PALATE UNSPEC
	1456	MAL NEOPLASM RETROMOLAR AREA
	1458	MAL NEO OTH SPEC PARTS MOUTH
	1459	MALIGNANT NEOPLASM MOUTH UNSPEC
	1460	MALIGNANT NEOPLASM TONSIL
	1461	MAL NEOPLASM TONSILLAR FOSSA
	1462	MAL NEOPLASM TONSILLAR PILLARS
	1463	MALIGNANT NEOPLASM VALLECULA
	1464	MAL NEO ANT ASPECT EPIGLOTTIS
	1465	MAL NEO JUNCTION REG EPIGLOTTIS
	1466	MAL NEO LATERAL WALL OROPHARYNX
	1467	MAL NEO POST WALL OF OROPHARYNX
	1468	OTH SPEC MAL NEO OROPHARYNX
	1469	MAL NEOPLASM OROPHARYNX UNSPEC
	1470	MAL NEO SUP WALL NASOPHARYNX
	1471	MAL NEO POST WALL NASOPHARYNX
	1472	MAL NEO LAT WALL NASOPHARYNX

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
701-702 DIAG INV & MANAGEMENT ONCOLOGICAL		
	1473	MAL NEO ANT WALL NASOPHARYNX
	1478	OTH SPEC MAL NEO NASOPHARYNX
	1479	MAL NEOPLASM NASOPHARYNX UNSPEC
	1480	MAL NEOPLASM POSTCRICOID REGION
	1481	MAL NEOPLASM PYRIFORM SINUS
	1482	MAL NEOPLASM ARYEPIGLOTTIC FOLD
	1483	MAL NEO POST HYPOPHARYNX WALL
	1488	OTH SPEC MAL NEO HYPOPHARYNX
	1489	MAL NEOPLASM HYPOPHARYNX UNSPEC
	1490	MAL NEOPLASM PHARYNX UNSPEC
	1491	MAL NEOPLASM WALDEYER'S RING
	1498	OTH MAL NEO LIP/OR CAV/PHARYNX
	1499	ILLDEF NEO LIP/ORAL CAV/PHARYNX
	1500	MAL NEOPLASM CERVICAL ESOPHAGUS
	1501	MAL NEOPLASM THORACIC ESOPHAGUS
	1502	MAL NEO ABDOMINAL ESOPHAGUS
	1503	MAL NEO UPPER THIRD ESOPHAGUS
	1504	MAL NEO MIDDLE THIRD ESOPHAGUS
	1505	MAL NEO LOWER THIRD ESOPHAGUS
	1508	OTH SPEC MAL NEOPLASM ESOPHAGUS
	1509	MAL NEOPLASM ESOPHAGUS UNSPEC
	1510	MALIGNANT NEOPLASM CARDIA
	1511	MALIGNANT NEOPLASM PYLORUS
	1512	MAL NEOPLASM PYLORIC ANTRUM
	1513	MAL NEOPLASM FUNDUS OF STOMACH
	1514	MAL NEOPLASM BODY OF STOMACH
	1515	MAL NEO LESSER CURV STOM UNSPEC
	1516	MAL NEO GREAT CURV STOM UNSPEC
	1518	MAL NEOPLASM OTH SITES STOMACH
	1519	MAL NEOPLASM STOMACH UNSPEC
	1520	MALIGNANT NEOPLASM DUODENUM
	1521	MALIGNANT NEOPLASM JEJUNUM
	1522	MALIGNANT NEOPLASM ILEUM
	1523	MAL NEO MECKEL'S DIVERTICULUM
	1528	OTHER MAL NEO SMALL INTESTINE
	1529	MAL NEO SMALL INTESTINE UNSPEC
	1530	MAL NEOPLASM HEPATIC FLEXURE
	1531	MAL NEOPLASM TRANSVERSE COLON
	1532	MAL NEOPLASM DESCENDING COLON
	1533	MAL NEOPLASM SIGMOID COLON
	1534	MALIGNANT NEOPLASM CECUM
	1535	MALIGNANT NEOPLASM APPENDIX
	1536	MAL NEOPLASM ASCENDING COLON
	1537	MAL NEOPLASM SPLENIC FLEXURE
	1538	MAL NEO OTH SPEC SITES COLON
	1539	MALIGNANT NEOPLASM COLON UNSPEC
	1540	MAL NEO RECTOSIGMOID JUNCTION
	1541	MALIGNANT NEOPLASM RECTUM
	1542	MALIGNANT NEOPLASM ANAL CANAL
	1543	MALIGNANT NEOPLASM ANUS UNSPEC
	1548	OTH MAL NEO RECT/RECTOSIG/ANUS
	1550	MAL NEOPLASM LIVER PRIMARY
	1551	MAL NEO INTRAHEPATIC BILE DUCTS
	1552	MAL NEO LIVER NOS PRIM/SECOND
	1560	MALIGNANT NEOPLASM GALLBLADDER
	1561	MAL NEO EXTRAHEPATIC BILE DUCTS

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
701-702 DIAG INV & MANAGEMENT ONCOLOGICAL		
	1562	MAL NEOPLASM AMPULLA OF VATER
	1568	OTH MAL NEO GALLBLADDER/DUCTS
	1569	MAL NEO BILIARY TRACT UNSPEC
	1570	MAL NEOPLASM HEAD OF PANCREAS
	1571	MAL NEOPLASM BODY OF PANCREAS
	1572	MAL NEOPLASM TAIL OF PANCREAS
	1573	MAL NEOPLASM PANCREATIC DUCT
	1574	MAL NEO ISLETS OF LANGERHANS
	1578	MAL NEO OTH SPEC SITES PANCREAS
	1579	MAL NEO PANCREAS UNSPEC PART
	1580	MAL NEOPLASM RETROPERITONEUM
	1588	MAL NEO SPEC PARTS PERITONEUM
	1589	MAL NEOPLASM PERITONEUM UNSPEC
	1590	MAL NEO INTESTINAL TRACT UNSPEC
	1591	MALIGNANT NEOPLASM SPLEEN NEC
	1598	MAL NEO OTH GI ORGAN/PERITON
	1599	MAL NEO ILLDEF GI ORGAN/PERITON
	1600	MAL NEOPLASM OF NASAL CAVITIES
	1601	MAL NEO AUD TUBE/MID EAR/MAST
	1602	MAL NEOPLASM OF MAXILLARY SINUS
	1603	MAL NEOPLASM OF ETHMOIDAL SINUS
	1604	MAL NEOPLASM OF FRONTAL SINUS
	1605	MAL NEOPLASM SPHENOIDAL SINUS
	1608	OTH MAL NASAL CAV/MID EAR/SINUS
	1609	MAL NEO ACCESSORY SINUS UNSPEC
	1610	MALIGNANT NEOPLASM OF GLOTTIS
	1611	MALIGNANT NEOPLASM SUPRAGLOTTIS
	1612	MALIGNANT NEOPLASM SUBGLOTTIS
	1613	MAL NEO LARYNGEAL CARTILAGES
	1618	MAL NEO OTH SPEC SITE LARYNX
	1619	MAL NEOPLASM OF LARYNX UNSPEC
	1620	MALIGNANT NEOPLASM OF TRACHEA
	1622	MAL NEOPLASM OF MAIN BRONCHUS
	1623	MAL NEO UPP LOBE BRONCHUS/LUNG
	1624	MAL NEO MID LOBE BRONCHUS/LUNG
	1625	MAL NEO LOW LOBE BRONCHUS/LUNG
	1628	MAL NEO OTH PARTS BRONCHUS/LUNG
	1629	MAL NEO OF BRONCHUS/LUNG UNSPEC
	1630	MAL NEOPLASM OF PARIETAL PLEURA
	1631	MAL NEOPLASM OF VISCERAL PLEURA
	1638	MAL NEOPLASM OTHER SITE PLEURA
	1639	MAL NEOPLASM OF PLEURA UNSPEC
	1640	MALIGNANT NEOPLASM OF THYMUS
	1641	MALIGNANT NEOPLASM OF HEART
	1642	MAL NEO OF ANTERIOR MEDIASTINUM
	1643	MAL NEO POSTERIOR MEDIASTINUM
	1648	OTH MAL NEO THYM/HRT/MEDIASTIN
	1649	MAL NEO MEDIASTINUM PART UNSPEC
	1650	MAL NEO UPP RESPIRATORY UNSPEC
	1658	OTH MAL NEO RESP/INTRATHOR SITE
	1659	MAL NEO ILLDEF SITES RESP SYS
	1700	MAL BONES SKULL/FACE EXC MAND
	1701	MALIGNANT NEOPLASM OF MANDIBLE
	1702	MAL NEO VERT COL EXC SAC/COCCYX
	1703	MAL NEO RIBS/STERNUM/CLAVICLE
	1704	MAL NEO LONG BONE UPP LIMB/SCAP

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
701-702 DIAG INV & MANAGEMENT ONCOLOGICAL		
	1705	MAL NEO SHORT BONES UPPER LIMB
	1706	MAL NEO PELVIC BONES/SAC/COCCYX
	1707	MAL NEO LONG BONES LOWER LIMB
	1708	MAL NEO SHORT BONES LOWER LIMB
	1709	MAL NEO BONE/ARTIC CART UNSPEC
	1710	MAL NEO SFT TISS HEAD/FACE/NECK
	1712	MAL NEO SOFT TISS ARM/SHOULDER
	1713	MAL NEO SOFT TISS LOW LIMB/HIP
	1714	MAL NEOPLASM SOFT TISSUE THORAX
	1715	MAL NEOPLASM SOFT TISS ABDOMEN
	1716	MAL NEOPLASM SOFT TISSUE PELVIS
	1717	MAL NEO SOFT TISS TRUNK UNSPEC
	1718	MAL NEO OTH CONNECT/SOFT TISSUE
	1719	MAL NEO CONNECT/SOFT TISS NOS
	1720	MALIGNANT MELANOMA OF LIP
	1721	MAL MELANOMA EYELID/CANTHUS
	1722	MAL MELANOMA EAR/EXT AUR CANAL
	1723	MAL MELANOMA OTH/UNSPEC FACE
	1724	MALIGNANT MELANOMA SCALP/NECK
	1725	MAL MELANOMA TRUNK EXC SCROTUM
	1726	MAL MELANOMA UPP LIMB/SHOULDER
	1727	MAL MELANOMA OF LOWER LIMB/HIP
	1728	MAL MELANOMA OTH SPEC SITE SKIN
	1729	MAL MELANOMA SKIN SITE UNSPEC
	1730	MALIGNANT NEOPLASM SKIN OF LIP
	1731	MAL NEOPLASM OF EYELID/CANTHUS
	1732	MAL NEOPLASM EAR/EXT AUR CANAL
	1733	MAL NEO SKIN OTH/UNSPEC FACE
	1734	MAL NEOPLASM SCALP/SKIN OF NECK
	1735	MAL NEO SKIN TRUNK EXC SCROTUM
	1736	MAL NEO SKIN UPP LIMB/SHOULDER
	1737	MAL NEO SKIN OF LOWER LIMB/HIP
	1738	MAL NEOPLASM OTH SPEC SITE SKIN
	1739	MAL NEOPLASM SKIN SITE UNSPEC
	1740	MAL NEO BREAST NIPPLE/AREOLA
	1741	MAL NEO CENTRAL PORTION BREAST
	1742	MAL NEO UPPER-INNER QUAD BREAST
	1743	MAL NEO LOWER-INNER QUAD BREAST
	1744	MAL NEO UPPER-OUTER QUAD BREAST
	1745	MAL NEO LOWER-OUTER QUAD BREAST
	1746	MAL NEO AXILLARY TAIL BREAST
	1748	OTH SPEC MAL NEO FEMALE BREAST
	1749	MAL NEO FEMALE BREAST UNSPEC
	1750	MAL NEO MALE BR NIPPLE/AREOLA
	1759	MAL NEO OTH/UNSPEC SITE MALE BR
	179	MAL NEOPLASM UTERUS PART UNSPEC
	1800	MALIGNANT NEOPLASM ENDOCERVIX
	1801	MALIGNANT NEOPLASM OF EXOCERVIX
	1808	OTH MAL NEOPLASM CERVIX UTERI
	1809	MAL NEO OF CERVIX UTERI UNSPEC
	181	MALIGNANT NEOPLASM OF PLACENTA
	1820	MAL NEO CORP UTERI EXC ISTHMUS
	1821	MAL NEOPLASM OF UTERINE ISTHMUS
	1828	OTH MAL NEOPLASM BODY OF UTERUS
	1830	MALIGNANT NEOPLASM OF OVARY
	1832	MAL NEOPLASM OF FALLOPIAN TUBE

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
701-702 DIAG INV & MANAGEMENT ONCOLOGICAL		
	1833	MAL NEOPLASM OF BROAD LIGAMENT
	1834	MALIGNANT NEOPLASM PARAMETRIUM
	1835	MAL NEOPLASM OF ROUND LIGAMENT
	1838	OTH SPEC MAL NEO UTERINE ADNEXA
	1839	MAL NEO UTERINE ADNEXA UNSPEC
	1840	MALIGNANT NEOPLASM OF VAGINA
	1841	MALIGNANT NEOPLASM LABIA MAJORA
	1842	MALIGNANT NEOPLASM LABIA MINORA
	1843	MALIGNANT NEOPLASM OF CLITORIS
	1844	MALIGNANT NEOPLASM VULVA UNSPEC
	1848	MAL NEO OTH FEMALE GENITAL ORG
	1849	MAL NEO FEMALE GEN ORG UNSPEC
	185	MALIGNANT NEOPLASM OF PROSTATE
	1860	MAL NEOPLASM UNDESCENDED TESTIS
	1869	MAL NEOPLASM TESTIS OTH/UNSPEC
	1871	MALIGNANT NEOPLASM OF PREPUCE
	1872	MALIGNANT NEOPLASM GLANS PENIS
	1873	MAL NEOPLASM OF BODY OF PENIS
	1874	MAL NEOPLASM PENIS PART UNSPEC
	1875	MALIGNANT NEOPLASM EPIDIDYMIS
	1876	MAL NEOPLASM OF SPERMATIC CORD
	1877	MALIGNANT NEOPLASM OF SCROTUM
	1878	OTH SPEC MAL NEO MALE GEN ORG
	1879	MAL NEO MALE GENITAL ORG UNSPEC
	1880	MAL NEOPLASM OF BLADDER TRIGONE
	1881	MALIGNANT NEOPLASM BLADDER DOME
	1882	MAL NEO BLADDER LATERAL WALL
	1883	MAL NEO BLADDER ANTERIOR WALL
	1884	MAL NEO BLADDER POSTERIOR WALL
	1885	MALIGNANT NEOPLASM BLADDER NECK
	1886	MAL NEOPLASM URETERIC ORIFICE
	1887	MALIGNANT NEOPLASM OF URACHUS
	1888	MAL NEO OTH SPEC SITES BLADDER
	1889	MAL NEO OF BLADDER PART UNSPEC
	1890	MAL NEOPLASM KIDNEY EXC PELVIS
	1891	MALIGNANT NEOPLASM RENAL PELVIS
	1892	MALIGNANT NEOPLASM OF URETER
	1893	MALIGNANT NEOPLASM OF URETHRA
	1894	MAL NEO OF PARAURETHRAL GLANDS
	1898	MAL NEO OTH SPEC URINARY ORGANS
	1899	MAL NEO URINARY ORGANS SITE NOS
	1900	MALIGNANT NEOPLASM OF EYEBALL
	1901	MALIGNANT NEOPLASM OF ORBIT
	1902	MAL NEOPLASM OF LACRIMAL GLAND
	1903	MALIGNANT NEOPLASM CONJUNCTIVA
	1904	MALIGNANT NEOPLASM OF CORNEA
	1905	MALIGNANT NEOPLASM OF RETINA
	1906	MALIGNANT NEOPLASM OF CHOROID
	1907	MAL NEOPLASM OF LACRIMAL DUCT
	1908	MAL NEOPLASM OTH SPEC SITES EYE
	1909	MAL NEOPLASM OF EYE PART UNSPEC
	1910	MAL NEO CEREBRUM EXC LOBES/VENT
	1911	MAL NEOPLASM FRONTAL LOBE BRAIN
	1912	MAL NEO OF TEMPORAL LOBE BRAIN
	1913	MAL NEO OF PARIETAL LOBE BRAIN
	1914	MAL NEO OF OCCIPITAL LOBE BRAIN

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
701-702 DIAG INV & MANAGEMENT ONCOLOGICAL		
	1915	MAL NEOPLASM OF VENTRICLE BRAIN
	1916	MALIGNANT NEOPLASM CEREBELLUM
	1917	MALIGNANT NEOPLASM BRAIN STEM
	1918	MAL NEOPLASM OTH PARTS OF BRAIN
	1919	MALIGNANT NEOPLASM BRAIN UNSPEC
	1920	MAL NEOPLASM OF CRANIAL NERVES
	1921	MAL NEOPLASM CEREBRAL MENINGES
	1922	MALIGNANT NEOPLASM SPINAL CORD
	1923	MAL NEOPLASM OF SPINAL MENINGES
	1928	MAL NEO OTH SITE NERVOUS SYSTEM
	1929	MAL NEO NERVOUS SYS PART UNSPEC
	193	MAL NEOPLASM OF THYROID GLAND
	1940	MAL NEOPLASM OF ADRENAL GLAND
	1941	MAL NEOPLASM PARATHYROID GLAND
	1943	MAL NEO PIT GL/CRANIOPHAR DUCT
	1944	MALIGNANT NEOPLASM PINEAL GLAND
	1945	MALIGNANT NEOPLASM CAROTID BODY
	1946	MAL NEO AORTIC BODY/PARAGANGLIA
	1948	MAL NEO OTHER ENDOCRINE GLANDS
	1949	MAL NEO ENDOCRINE GL SITE NOS
	1950	MAL NEOPLASM OF HEAD/FACE/NECK
	1951	MALIGNANT NEOPLASM OF THORAX
	1952	MALIGNANT NEOPLASM OF ABDOMEN
	1953	MALIGNANT NEOPLASM OF PELVIS
	1954	MALIGNANT NEOPLASM UPPER LIMB
	1955	MALIGNANT NEOPLASM LOWER LIMB
	1958	MAL NEOPLASM OTHER SPEC SITES
	1970	SECONDARY MAL NEOPLASM OF LUNG
	1971	SECONDARY MAL NEO MEDIASTINUM
	1972	SECONDARY MAL NEOPLASM PLEURA
	1973	SECOND MAL NEO OTH RESP ORGANS
	1974	SECOND MAL NEO SMALL INTESTINE
	1975	SECOND MAL NEO LARGE INTESTINE
	1976	SECOND MAL NEO RETRO/PERITONEUM
	1977	SECONDARY MAL NEOPLASM OF LIVER
	1978	SECOND MAL NEO OTH DIGEST ORGAN
	1980	SECONDARY MAL NEOPLASM KIDNEY
	1981	SECOND MAL NEO OTH URINARY ORG
	1982	SECONDARY MAL NEOPLASM OF SKIN
	1983	SECOND MAL NEO BRAIN/SPIN CORD
	1984	SECOND MAL NEO OTH NERVOUS SYS
	1985	SECONDARY MAL NEO BONE/MARROW
	1986	SECONDARY MAL NEOPLASM OF OVARY
	1987	SECONDARY MAL NEO ADRENAL GLAND
	19881	SECONDARY MAL NEOPLASM BREAST
	19882	SECONDARY MAL NEO GENITAL ORG
	19889	SECONDARY MAL NEO OTH SPEC SITE
	1990	DISSEMINATED MALIGNANT NEOPLASM
	1991	OTHER MAL NEOPLASM UNSPEC SITE
	2300	CA IN SITU LIP/OR CAV/PHARYNX
	2301	CARCINOMA IN SITU OF ESOPHAGUS
	2302	CARCINOMA IN SITU OF STOMACH
	2303	CARCINOMA IN SITU OF COLON
	2304	CARCINOMA IN SITU OF RECTUM
	2305	CARCINOMA IN SITU OF ANAL CANAL
	2306	CARCINOMA IN SITU ANUS UNSPEC

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
701-702 DIAG INV & MANAGEMENT ONCOLOGICAL		
	2307	CA IN SITU OTH/UNSPEC INTESTINE
	2308	CA IN SITU LIVER/BILIARY SYSTEM
	2309	CA IN SITU OTH/UNSPEC DIGESTIVE
	2310	CARCINOMA IN SITU LARYNX
	2311	CARCINOMA IN SITU TRACHEA
	2312	CARCINOMA IN SITU BRONCHUS/LUNG
	2318	CA IN SITU OTH SPEC PARTS RESP
	2319	CARCINOMA IN SITU RESP PART NOS
	2320	CARCINOMA IN SITU SKIN OF LIP
	2321	CA IN SITU OF EYELID/CANTHUS
	2322	CA IN SITU EAR/EXT AUR CANAL
	2323	CA IN SITU SKIN OTH/UNSPEC FACE
	2324	CA IN SITU SCALP/SKIN OF NECK
	2325	CA IN SITU SKIN TRUNK EXC SCROT
	2326	CA IN SITU SKIN ARM/SHOULDER
	2327	CA IN SITU SKIN LOWER LIMB/HIP
	2328	CA IN SITU SKIN OTH SPEC SITES
	2329	CA IN SITU SKIN SITE UNSPEC
	2330	CARCINOMA IN SITU OF BREAST
	2331	CARCINOMA IN SITU CERVIX UTERI
	2332	CA IN SITU OTH/UNSPEC UTERUS
	2333	CA IN SITU FEMALE GEN ORG NOS
	2334	CARCINOMA IN SITU OF PROSTATE
	2335	CARCINOMA IN SITU OF PENIS
	2336	CA IN SITU MALE GEN ORG NOS
	2337	CARCINOMA IN SITU OF BLADDER
	2339	CA IN SITU OTH/UNSPEC URIN ORG
	2340	CARCINOMA IN SITU OF EYE
	2348	CARCINOMA IN SITU OTH SPEC SITE
	2349	CARCINOMA IN SITU SITE UNSPEC
	2350	NEO UNCERT BEHAV SALIVARY GLAND
	2351	NEO UNCERT BEHAV LIP/ORAL/PHAR
	2352	NEO UNCERT BEHAV GI/RECTUM
	2353	NEO UNCERT BEHAV LIVER/BILIARY
	2354	NEO UNCERT BEHAV RETRO/PERITON
	2355	NEO UNCERT BEHAV DIGEST ORG NOS
	2356	NEO UNCERTAIN BEHAVIOR LARYNX
	2357	NEO UNCERT BEHAV TRACH/BR/LUNG
	2358	NEO UNCERT BEHAV PLEUR/THYM/MED
	2359	NEO UNCERT BEHAV RESP ORGAN NOS
	2360	NEO UNCERTAIN BEHAVIOR UTERUS
	2361	NEO UNCERTAIN BEHAVIOR PLACENTA
	2362	NEO UNCERTAIN BEHAVIOR OVARY
	2363	NEO UNCERT BEHAV OTH FEMALE GEN
	2364	NEO UNCERTAIN BEHAVIOR TESTIS
	2365	NEO UNCERTAIN BEHAVIOR PROSTATE
	2366	NEO UNCERT BEHAV OTH MALE GEN
	2367	NEO UNCERTAIN BEHAVIOR BLADDER
	23690	NEO UNCERT BEHAV URIN ORG NOS
	23691	NEO UNCERT BEHAV KIDNEY/URETER
	23699	NEO UNCERT BEHAV OTH URIN ORG
	2370	NEO UNCERT BEHAV PIT/CRANIOPHAR
	2371	NEO UNCERT BEHAV PINEAL GLAND
	2372	NEO UNCERT BEHAV ADRENAL GLAND
	2373	NEO UNCERT BEHAV PARAGANGLIA
	2374	NEO UNCERT BEHAV OTH ENDOCRINE

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
701-702 DIAG INV & MANAGEMENT ONCOLOGICAL		
	2375	NEO UNCERT BEHAV BRAIN/SPINAL
	2376	NEO UNCERTAIN BEHAVIOR MENINGES
	23770	NEUROFIBROMATOSIS UNSPEC
	23771	NEUROFIBROMATOSIS TYPE 1
	23772	NEUROFIBROMATOSIS TYPE 2
	2379	NEO UNCERT BEHAV NERV SYS NOS
	2380	NEO UNCERT BEHAV BONE/ART CART
	2381	NEO UNCERT BEHAV SOFT TISSUE
	2382	NEO UNCERTAIN BEHAVIOR OF SKIN
	2383	NEO UNCERTAIN BEHAVIOR BREAST
	2388	NEO UNCERT BEHAV OTH SPEC SITES
	2389	NEO UNCERT BEHAV SITE UNSPEC
	2390	NEO UNSPEC NATURE DIGESTIVE SYS
	2391	NEO UNSPEC NATURE RESPIRATORY
	2392	NEO NOS NAT BONE/SOFT TISS/SKIN
	2393	NEO UNSPECIFIED NATURE BREAST
	2394	NEO UNSPECIFIED NATURE BLADDER
	2395	NEO UNSPEC NATURE OTH GU ORGANS
	2396	NEO UNSPECIFIED NATURE OF BRAIN
	2397	NEO NOS NAT ENDOCRINE/NERV SYS
	2398	NEO UNSPEC NATURE OTH SPEC SITE
	2399	NEO UNSPEC NATURE SITE UNSPEC
	7842	SWELLING/MASS/LUMP HEAD/NECK
	V581	ENCOUNTER FOR CHEMOTHERAPY
	V711	OBSERV SUSPECTED MAL NEOPLASM

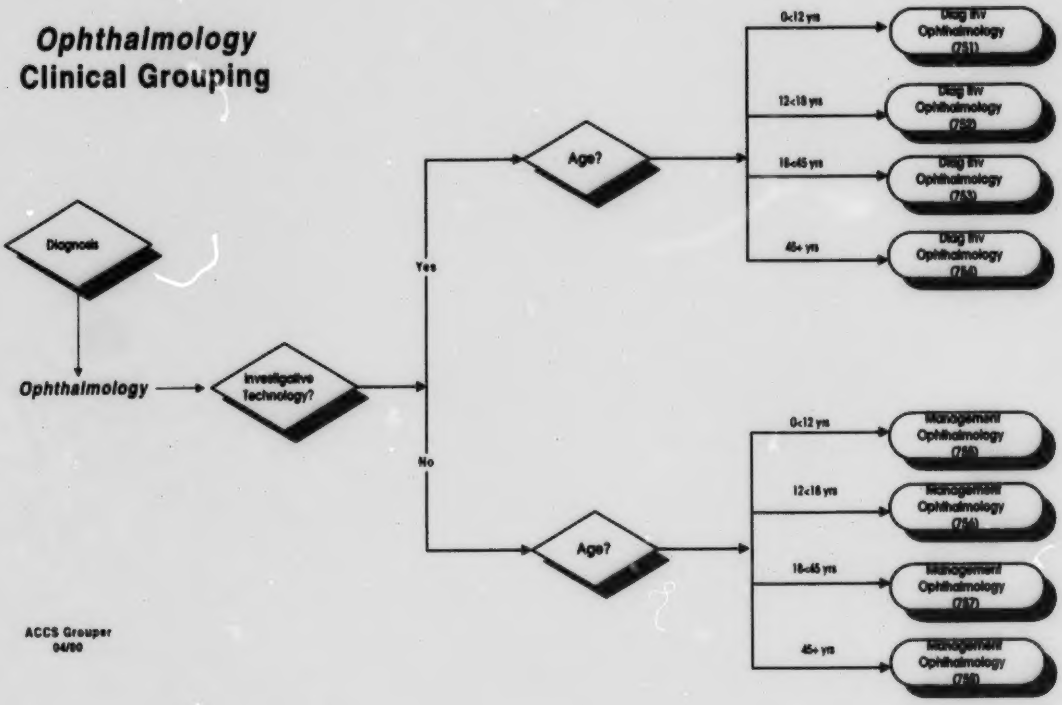
ACCS CELL
703 Radiotherapy - No Intervention Code

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
703 RADIOTHERAPY		
	V580	ENCOUNTER FOR RADIOTHERAPY

ACCS CELL
704 IV Therapy – Non Cancer Related

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
704 IV THERAPY – NON CANCER RELATED		
	V581	ENCOUNTER FOR CHEMOTHERAPY

Ophthalmology
Clinical Grouping


Diagnosis
Ophthalmology
Investigative Technology?
Yes
No
Age?
0<12 yrs
12<18 yrs
18<45 yrs
45+ yrs
Diag Inv Ophthalmology (751)
Diag Inv Ophthalmology (752)
Diag Inv Ophthalmology (753)
Diag Inv Ophthalmology (754)
Age?
0<12 yrs
12<18 yrs
18<45 yrs
45+ yrs
Management Ophthalmology (755)
Management Ophthalmology (756)
Management Ophthalmology (757)
Management Ophthalmology (758)

ACCS Grouper
04/00

ACCS CELL
751-758 Ophthalmology

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
751-758 DIAG INV & MANAGEMENT OPHTHALMOLOGY		
	01730	TUBERCULOSIS EYE - UNSPEC EXAM
	01731	TUBERCULOSIS EYE - NO EXAM
	01732	TUBERCULOSIS EYE - EXAM UNKNOWN
	01733	TUBERCULOSIS EYE - MICRO DX
	01734	TUBERCULOSIS EYE - CULTURE DX
	01735	TUBERCULOSIS EYE - HISTOLOGY DX
	01736	TUBERCULOSIS EYE - OTHER TEST
	03281	CONJUNCTIVAL DIPHTHERIA
	03681	MENINGOCOCCAL OPTIC NEURITIS
	05320	HERPES ZOSTER DERMATITIS EYELID
	05321	H ZOSTER KERATOCONJUNCTIVITIS
	05322	HERPES ZOSTER IRIDOCYCLITIS
	05329	HERPES ZOSTER W OTH OPHTH COMPL
	05440	HERP SIMPLEX UNSPEC OPHTH COMPL
	05441	HERP SIMPLEX DERMATITIS EYELID
	05442	DENDRITIC KERATITIS
	05443	H SIMPLEX DISCIFORM KERATITIS
	05444	HERPES SIMPLEX IRIDOCYCLITIS
	05449	H SIMPLEX W OTH OPHTH COMPL
	05571	MEASLES KERATOCONJUNCTIVITIS
	0760	INITIAL STAGE TRACHOMA
	0761	ACTIVE STAGE TRACHOMA
	0769	UNSPECIFIED TRACHOMA
	0770	INCLUSION CONJUNCTIVITIS
	0771	EPIDEMIC KERATOCONJUNCTIVITIS
	0772	PHARYNGOCONJUNCTIVAL FEVER
	0773	OTHER ADENOVIRAL CONJUNCTIVITIS
	0774	EPIDEM HEMORRHAG CONJUNCTIVITIS
	0778	OTHER VIRAL CONJUNCTIVITIS
	07798	UNSPEC CHLAMYD CONJUNCT DISEASE
	07799	UNSPEC VIRAL CONJUNCT DISEASE
	0903	SYPHILITIC INTERSTIT KERATITIS
	09150	SYPHILITIC UVEITIS UNSPECIFIED
	09151	SYPH CHORIORETINITIS(SECONDARY)
	09152	SYPH IRIDOCYCLITIS (SECONDARY)
	09483	SYPH DISSEM RETINOCHOROIDITIS
	09484	SYPHILITIC OPTIC ATROPHY
	0950	SYPHILITIC EPISCLERITIS
	09840	GC CONJUNCTIVITIS (NEONATORUM)
	09841	GONOCOCCAL IRIDOCYCLITIS
	09842	GONOCOCCAL ENDOPHTHALMIA
	09843	GONOCOCCAL KERATITIS
	09849	OTHER GONOCOCCAL INFECTION EYE
	09881	GC KERATOSIS (BLENNORRHAGICA)
	11502	HISTOPLASMA CAPSULATUM RETIN
	11512	HISTOPLASMA DUBOISII RETINITIS
	11592	UNSPEC HISTOPLASMOSIS RETINITIS
	1301	TOXOPLASMOSIS CONJUNCTIVITIS
	1302	TOXOPLASMOSIS CHORIORETINITIS
	1391	LATE EFFECTS OF TRACHOMA
	2161	BENIGN NEOPLASM EYELID/CANTHUS
	2240	BENIGN NEOPLASM OF EYEBALL

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
751-756 DIAG INV & MANAGEMENT OPHTHALMOLOGY		
	2241	BENIGN NEOPLASM OF ORBIT
	2242	BENIGN NEOPLASM LACRIMAL GLAND
	2243	BENIGN NEOPLASM OF CONJUNCTIVA
	2244	BENIGN NEOPLASM OF CORNEA
	2245	BENIGN NEOPLASM OF RETINA
	2246	BENIGN NEOPLASM OF CHOROID
	2247	BENIGN NEOPLASM LACRIMAL DUCT
	2248	BEN NEO OTH SPEC PARTS OF EYE
	2249	BENIGN NEOPLASM EYE PART UNSPEC
	22803	HEMANGIOMA OF RETINA
	25050	DIABETES WITH OPHTH MAN TYPE II
	25051	DIABETES WITH OPHTH MAN TYPE I
	2640	VIT A DEFIC W CONJUNCT XEROSIS
	2641	VITAMIN A DEFIC W BITOT'S SPOT
	2642	VIT A DEFIC W CORNEAL XEROSIS
	2643	VIT A DEFIC W CORN ULC/XEROSIS
	2644	VITAMIN A DEFIC W KERATOMALACIA
	2645	VIT A DEFIC W NIGHT BLINDNESS
	2646	VIT A DEFIC/XEROPHTH SCAR CORN
	2647	OTH OCULAR MAN VITAMIN A DEFIC
	33381	BLEPHAROSPASM
	36000	PURULENT ENDOPHTHALMITIS UNSPEC
	36001	ACUTE ENDOPHTHALMITIS
	36002	PANOPHTHALMITIS
	36003	CHRONIC ENDOPHTHALMITIS
	36004	VITREOUS ABSCESS
	36011	SYMPATHETIC UVEITIS
	36012	PANUVEITIS
	36013	PARASITIC ENDOPHTHALMITIS NOS
	36014	OPHTHALMIA NODOSA
	36019	OTHER ENDOPHTHALMITIS
	36020	DEGENERATIVE DISORD GLOBE NOS
	36021	PROGRESSIVE HIGH (DEGEN) MYOPIA
	36023	SIDEROSIS
	36024	OTHER METALLOSIS
	36029	OTH DEGENERATIVE DISORDER GLOBE
	36030	HYPOTONY OF EYE UNSPECIFIED
	36031	PRIMARY HYPOTONY
	36032	OCULAR FISTULA CAUSING HYPOTONY
	36033	HYPOTONY W OTH OCULAR DISORDERS
	36034	FLAT ANTERIOR CHAMBER
	36040	DEGENERATED GLOBE OR EYE UNSPEC
	36041	BLIND HYPOTENSIVE EYE
	36042	BLIND HYPERTENSIVE EYE
	36043	HEMOPHTHALMOS EXC CURRENT INJ
	36044	LEUCOCORIA
	36050	FB MAGNETIC INTRAOCULAR UNSPEC
	36051	FB MAGNETIC IN ANTERIOR CHAMBER
	36052	FB MAGNETIC IRIS/CILIARY BODY
	36053	FOREIGN BODY MAGNETIC IN LENS
	36054	FOREIGN BODY MAGNETIC VITREOUS
	36055	FB MAGNETIC POSTERIOR CHAMBER
	36059	FB MAGNETIC OTH/MULTIPLE SITES
	36060	FOREIGN BODY INTRAOCULAR UNSPEC
	36061	FOREIGN BODY ANTERIOR CHAMBER
	36062	FOGEIGN BODY IRIS/CILIARY BODY

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
751-758 DIAG INV & MANAGEMENT OPHTHALMOLOGY		
	36063	FOREIGN BODY IN LENS
	36064	FOREIGN BODY IN VITREOUS
	36065	FOREIGN BODY POSTERIOR CHAMBER
	36069	FOREIGN BODY OTH/MULTIPLE SITES
	36081	LUXATION OF GLOBE
	36089	OTHER DISORDERS OF GLOBE
	3609	UNSPECIFIED DISORDER OF GLOBE
	36100	RETINAL DETACH W RET DEFECT NOS
	36101	REC DETACH PART W SINGLE DEFECT
	36102	REC DETACH PART W MULT DEFECT
	36103	RECENT DETACH PART W GIANT TEAR
	36104	REC DETACH PART W RET DIALYSIS
	36105	RECENT DETACH TOTAL/SUBTOTAL
	36106	OLD DETACHMENT PARTIAL
	36107	OLD DETACHMENT TOTAL/SUBTOTAL
	36110	RETINOSCHISIS UNSPECIFIED
	36111	FLAT RETINOSCHISIS
	36112	BULLOUS RETINOSCHISIS
	36113	PRIMARY RETINAL CYSTS
	36114	SECONDARY RETINAL CYSTS
	36119	OTH RETINOSCHISIS/RETINAL CYSTS
	3612	SEROUS RETINAL DETACHMENT
	36130	RETINAL DEFECT UNSPECIFIED
	36131	ROUND HOLE RETINA NO DETACHMENT
	36132	HORSESHOE TEAR RETINA NO DETACH
	36133	MULT DEFECTS RETINA NO DETACH
	36181	TRACTION DETACHMENT OF RETINA
	36189	OTHER FORMS RETINAL DETACHMENT
	3619	UNSPECIFIED RETINAL DETACHMENT
	36201	BACKGROUND DIABETIC RETINOPATHY
	36202	PROLIF DIABETIC RETINOPATHY
	36210	BACKGROUND RETINOPATHY UNSPEC
	36211	HYPERTENSIVE RETINOPATHY
	36212	EXUDATIVE RETINOPATHY
	36213	CHANGES IN VASCULAR APPEARANCE
	36214	RETINAL MICROANEURYSMS NOS
	36215	RETINAL TELANGIECTASIA
	36216	RETINAL NEOVASCULARIZATION NOS
	36217	OTH INTRARET MICROVASC ABNORM
	36218	RETINAL VASCULITIS
	36221	RETROLENTAL FIBROPLASIA
	36229	OTH NONDIAB PROLIF RETINOPATHY
	36230	RETINAL VASCULAR OCCLUSION NOS
	36231	CENTRAL RET ARTERY OCCLUSION
	36232	ARTERIAL BRANCH OCCLUSION
	36233	PARTIAL ARTERIAL OCCLUSION
	36234	TRANSIENT ARTERIAL OCCLUSION
	36235	CENTRAL RETINAL VEIN OCCLUSION
	36236	VENOUS TRIBUTARY OCCLUSION
	36237	VENOUS ENGORGEMENT
	36240	RETINAL LAYER SEPARATION UNSPEC
	36241	CENTRAL SEROUS RETINOPATHY
	36242	SEROUS DETACH RET PIGMENT EPITH
	36243	HEMORRHAG DETACH RET PIG EPITH
	36250	MACULAR DEGENERATION UNSPEC
	36251	NONEXUDATIVE SEN MACULAR DEGEN

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
751-758 DIAG INV & MANAGEMENT OPHTHALMOLOGY		
	36252	EXUDATIVE SENILE MACULAR DEGEN
	36253	CYSTOID MACULAR DEGENERATION
	36254	MACULAR CYST/HOLE/PSEUDOHOLE
	36255	TOXIC MACULOPATHY
	36256	MACULAR PUCKERING
	36257	DRUSEN (DEGENERATIVE)
	36260	PERIPH RETINAL DEGENERATION NOS
	36261	PAVING STONE DEGENERATION
	36262	MICROCYSTOID DEGENERATION
	36263	LATTICE DEGENERATION
	36264	SENILE RETICULAR DEGENERATION
	36265	SECONDARY PIGMENTARY DEGEN
	36266	SECONDARY VITREORETINAL DEGEN
	36270	HERED RETINAL DYSTROPHY NOS
	36271	RETINAL DYSTROPHY IN LIPIDOSES
	36272	RETINAL DYSTROPY IN OTH DISORD
	36273	VITREORETINAL DYSTROPHIES
	36274	PIGMENTARY RETINAL DYSTROPHY
	36275	OTH DYSTROPHIES SENSORY RETINA
	36276	DYSTROPHIES RET PIGMENT EPITH
	36277	DYSTROPHIES BRUCH'S MEMBRANE
	36281	RETINAL HEMORRHAGE
	36282	RETINAL EXUDATES AND DEPOSITS
	36283	RETINAL EDEMA
	36284	RETINAL ISCHEMIA
	36285	RET NERVE FIBER BUNDLE DEFECTS
	36289	OTHER RETINAL DISORDERS
	3629	UNSPECIFIED RETINAL DISORDER
	36300	FOCAL CHORIORETINITIS UNSPEC
	36301	FOC CHOROID/CHORIORET JUXTAPAP
	36303	FOC CHOROID/CHORIORET OTH POST
	36304	FOCAL CHOROID/CHORIORET PERIPH
	36305	FOC RETIN/RETINCHOROID JUXTAPAP
	36306	FOC RETIN/RETINOCHOROID MACULAR
	36307	FOC RETIN/RETINCHOROID OTH POST
	36308	FOC RETIN/RETINOCHOROID PERIPH
	36310	DISSEM CHORIORETINITIS UNSPEC
	36311	DISSEM CHOROID/CHORIORET POST
	36312	DISSEM CHOROID/CHORIORET PERIPH
	36313	DISSEM CHOROID/CHORIORET GEN
	36314	DISSEM RETIN/RETINOCHOROID MET
	36315	DISSEM RETIN/RETINCHOROID EPITH
	36320	CHORIORETINITIS UNSPECIFIED
	36321	PARS PLANITIS
	36322	HARADA'S DISEASE
	36330	CHORIORETINAL SCAR UNSPECIFIED
	36331	SOLAR RETINOPATHY
	36332	OTHER MACULAR SCARS
	36333	OTHER SCARS OF POSTERIOR POLE
	36334	PERIPHERAL CHORIORETINAL SCARS
	36335	DISSEMINATED CHORIORET SCARS
	36340	CHOROIDAL DEGENERATION UNSPEC
	36341	SENILE ATROPHY OF CHOROID
	36342	DIFFUSE SECOND ATROPHY CHOROID
	36343	ANGIOID STREAKS OF CHOROID
	36350	HERED CHOROID DYST/ATROPHY NOS

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
751-758 DIAG INV & MANAGEMENT OPHTHALMOLOGY		
	36351	CIRCUMPAP DYST CHOROID PARTIAL
	36352	CIRCUMPAP DYSTROPHY CHOROID TOT
	36353	CENTRAL DYSTROPHY CHOROID PART
	36354	CENTRAL CHOROIDAL ATROPHY TOTAL
	36355	CHOROIDEREMIA
	36356	OTH DIFFUSE/GEN DYSTROPHY PART
	36357	OTH DIFFUSE/GEN DYSTROPHY TOTAL
	36361	CHOROIDAL HEMORRHAGE UNSPEC
	36362	EXPULSIVE CHOROIDAL HEMORRHAGE
	36363	CHOROIDAL RUPTURE
	36370	CHOROIDAL DETACHMENT UNSPEC
	36371	SEROUS CHOROIDAL DETACHMENT
	36372	HEMORRHAGIC CHOROIDAL DETACH
	3638	OTHER DISORDERS OF CHOROID
	3639	UNSPECIFIED DISORDER OF CHOROID
	36400	ACUTE/SUBAC IRIDOCYCLITIS NOS
	36401	PRIMARY IRIDOCYCLITIS
	36402	RECURRENT IRIDOCYCLITIS
	36403	SECOND IRIDOCYCLITIS INFECTIOUS
	36404	SECOND IRIDOCYCLITIS NONINFECT
	36405	HYPOPYON
	36410	CHRONIC IRIDOCYCLITIS UNSPEC
	36411	CHR IRIDOCYCLITIS DISEASES EC
	36421	FUCHS' HETEROCHROMIC CYCLITIS
	36422	GLAUCOMATOCYCLITIC CRISES
	36423	LENS-INDUCED IRIDOCYCLITIS
	36424	VOGT-KOYANAGI SYNDROME
	3643	UNSPECIFIED IRIDOCYCLITIS
	36441	HYPHEMA
	36442	RUBEOSIS IRIDIS
	36451	ESSENT/PROGRESSIVE IRIS ATROPHY
	36452	IRIDOSCHISIS
	36453	PIGMENTARY IRIS DEGENERATION
	36454	DEGENERATION PUPILLARY MARGIN
	36455	MIOTIC CYSTS PUPILLARY MARGIN
	36456	DEGEN CHANGES OF CHAMBER ANGLE
	36457	DEGEN CHANGES OF CILIARY BODY
	36459	OTHER IRIS ATROPHY
	36460	IDIOPATHIC CYSTS IRIS/ANT CHAMB
	36461	IMPLANTATN CYSTS IRIS/ANT CHAMB
	36462	EXUDATIVE CYSTS IRIS/ANT CHAMB
	36463	PRIMARY CYST OF PARS PLANA
	36464	EXUDATIVE CYST OF PARS PLANA
	36470	ADHESIONS OF IRIS UNSPECIFIED
	36471	POSTERIOR SYNECHIAE
	36472	ANTERIOR SYNECHIAE
	36473	GONIOSYNECHIAE
	36474	PUPILLARY MEMBRANES
	36475	PUPILLARY ABNORMALITIES
	36476	IRIDODIALYSIS
	36477	RECESSION OF CHAMBER ANGLE
	3648	OTH DISORDERS IRIS/CILIARY BODY
	3649	UNSPEC DISORD IRIS/CILIARY BODY
	36500	PREGLAUCOMA UNSPECIFIED
	36501	OPEN ANGLE BORDERLINE FINDINGS
	36502	ANATOMICAL NARROW ANGLE

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
751-758 DIAG INV & MANAGEMENT OPHTHALMOLOGY		
	36503	STEROID RESPONDERS
	36504	OCULAR HYPERTENSION
	36510	OPEN-ANGLE GLAUCOMA UNSPECIFIED
	36511	PRIMARY OPEN ANGLE GLAUCOMA
	36512	LOW TENSION GLAUCOMA
	36513	PIGMENTARY GLAUCOMA
	36514	GLAUCOMA OF CHILDHOOD
	36515	RESIDUAL OF OPEN ANGLE GLAUCOMA
	36520	PRIM ANGLE-CLOSURE GLAUCOMA NOS
	36521	INTERMIT ANGLE-CLOSURE GLAUCOMA
	36522	ACUTE ANGLE-CLOSURE GLAUCOMA
	36523	CHRONIC ANGLE-CLOSURE GLAUCOMA
	36524	RESIDUAL OF ANGLE-CLOSURE GLAUC
	36531	GLAUC STEROID-INDUCED GLAUCOMA
	36532	RESID STEROID-INDUCED GLAUCOMA
	36541	GLAUC W CHAMBER ANGLE ANOMALIES
	36542	GLAUCOMA WITH ANOMALIES OF IRIS
	36543	GLAUCOMA W OTH ANT SEGMENT ANOM
	36544	GLAUCOMA WITH SYSTEMIC SYNDROME
	36551	PHACOLYTIC GLAUCOMA
	36552	PSEUDOEXFOLIATION GLAUCOMA
	36559	GLAUCOMA W OTHER LENS DISORDERS
	36560	GLAUCOMA W UNSPEC OCULAR DISORD
	36561	GLAUCOMA WITH PUPILLARY BLOCK
	36562	GLAUCOMA W OCULAR INFLAMMATIONS
	36563	GLAUCOMA WITH VASCULAR DISORDER
	36564	GLAUCOMA WITH TUMORS OR CYSTS
	36565	GLAUCOMA WITH OCULAR TRAUMA
	36581	HYPERSECRETION GLAUCOMA
	36582	GLAUC W INCR EPISCLER VEN PRESS
	36589	OTHER SPECIFIED GLAUCOMA
	3659	UNSPECIFIED GLAUCOMA
	36600	NONSENILE CATARACT UNSPECIFIED
	36601	ANT SUBCAPSULAR POLAR CATARACT
	36602	POST SUBCAPSULAR POLAR CATARACT
	36603	CORT/LAMELLAR/ZONULAR CATARACT
	36604	NUCLEAR CATARACT
	36609	OTH/COMBIN NONSENILE CATARACT
	36610	SENILE CATARACT UNSPECIFIED
	36611	PSEUDOEXFOLIATION LENS CAPSULE
	36612	INCIPIENT CATARACT
	36613	ANT SUBCAPS POLAR SEN CATARACT
	36614	POST SUBCAPS POLAR SEN CATARACT
	36615	CORTICAL SENILE CATARACT
	36616	NUCLEAR SCLEROSIS
	36617	TOTAL OR MATURE CATARACT
	36618	HYPERMATURE CATARACT
	36619	OTH/COMBINED SENILE CATARACT
	36620	TRAUMATIC CATARACT UNSPECIFIED
	36621	LOCALIZED TRAUMATIC OPACITIES
	36622	TOTAL TRAUMATIC CATARACT
	36623	PART RESOLVE TRAUMATIC CATARACT
	36630	CATARACTA COMPLICATA UNSPEC
	36631	GLAUCOMATOUS FLECKS (SUBCAPS)
	36632	CATARACT IN INFLAMMATORY DISORD
	36633	CATARACT W NEOVASCULARIZATION

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
751-758 DIAG INV & MANAGEMENT OPHTHALMOLOGY		
	36634	CATARACT IN DEGENERATIVE DISORD
	36641	DIABETIC CATARACT
	36642	TETANIC CATARACT
	36643	MYOTONIC CATARACT
	36644	CATARACT ASSOC W OTH SYNDROMES
	36645	TOXIC CATARACT
	36646	CATARACT W RADIAT/OTH INFLUENCE
	36650	AFTER-CATARACT UNSPECIFIED
	36651	SOEMMERING'S RING
	36652	OTH AFT-CATARACT NOT OBSCUR VIS
	36653	AFTER-CATARACT OBSCURING VISION
	3668	OTHER CATARACT
	3669	UNSPECIFIED CATARACT
	3670	HYPERMETROPIA
	3671	MYOPIA
	36720	ASTIGMATISM UNSPECIFIED
	36721	REGULAR ASTIGMATISM
	36722	IRREGULAR ASTIGMATISM
	36731	ANISOMETROPIA
	36732	ANISEIKONIA
	3674	PRESBYOPIA
	36751	PARESIS OF ACCOMMODATION
	36752	TOT/COMPLET INT OPHTHALMOPLEGIA
	36753	SPASM OF ACCOMMODATION
	36781	TRANSIENT REFRACTIVE CHANGE
	36789	OTH DISORDERS REFRACTION/ACCOM
	3679	UNSPEC DISORD REFRACTION/ACCOM
	36800	AMBLYOPIA UNSPECIFIED
	36801	STRABISMIC AMBLYOPIA
	36802	DEPRIVATION AMBLYOPIA
	36803	REFRACTIVE AMBLYOPIA
	36810	SUBJECTIVE VIS DISTURBANCE NOS
	36811	SUDDEN VISUAL LOSS
	36812	TRANSIENT VISUAL LOSS
	36813	VISUAL DISCOMFORT
	36814	VISUAL DISTORTIONS SHAPE/SIZE
	36815	OTH VIS DISTORT/ENTOPTIC PHENOM
	36816	PSYCHOPHYSICAL VIS DISTURBANCES
	3682	DIPLOPIA
	36830	BINOCULAR VISION DISORD UNSPEC
	36831	SUPPRESSION OF BINOCULAR VISION
	36832	SIMULTANEOUS VIS PERCEPT NO FUS
	36833	FUSION W DEFECTIVE STEREOPSIS
	36834	ABNORMAL RETINAL CORRESPONDENCE
	36840	VISUAL FIELD DEFECT UNSPECIFIED
	36841	SCOTOMA INVOLVING CENTRAL AREA
	36842	SCOTOMA OF BLIND SPOT AREA
	36843	SECTOR OR ARCUATE DEFECTS
	36844	OTH LOCALIZED VIS FIELD DEFECT
	36845	GEN CONTRACTION OR CONSTRICTION
	36846	HOMONYMOUS BILAT FIELD DEFECTS
	36847	HETERONYMOUS BILAT FIELD DEFECT
	36851	PROTAN DEFECT
	36852	DEUTAN DEFECT
	36853	TRITAN DEFECT
	36854	ACHROMATOPSIA

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
751-758 DIAG INV & MANAGEMENT OPHTHALMOLOGY		
	36855	ACQUIRED COLOR VIS DEFICIENCIES
	36859	OTHER COLOR VISION DEFICIENCIES
	36860	NIGHT BLINDNESS UNSPECIFIED
	36861	CONGENITAL NIGHT BLINDNESS
	36862	ACQUIRED NIGHT BLINDNESS
	36863	ABNORMAL DARK ADAPTATION CURVE
	36869	OTHER NIGHT BLINDNESS
	3688	OTHER SPEC VISUAL DISTURBANCES
	3689	UNSPECIFIED VISUAL DISTURBANCE
	36900	PROFOUND IMPAIR BOTH EYES NOS
	36901	TOTAL IMPAIRMENT BOTH EYES
	36902	ONE EYE NEAR TOT IMPAIR/OTH NOS
	36903	ONE EYE NEAR TOT IMPAIR/OTH TOT
	36904	VIS IMPAIR BOTH EYES NEAR TOTAL
	36905	ONE EYE PROFOUND IMPAIR/OTH NOS
	36906	ONE EYE PROFOUND IMPAIR/OTH TOT
	36907	ONE EYE PROFOUND/OTH NEAR TOTAL
	36908	VIS IMPAIR BOTH EYES PROFOUND
	36910	ONE EYE BLIND/OTH LOW VIS NOS
	36911	ONE EYE SEV IMPAR/OTH BLIND NOS
	36912	ONE EYE SEVERE IMPAIR/OTH TOTAL
	36913	ONE EYE SEV IMPAIR/OTH NEAR TOT
	36914	ONE EYE SEV IMPAIR/OTH PROFOUND
	36915	ONE EYE MOD IMPAR/OTH BLIND NOS
	36916	ONE EYE MOD IMPAIR/OTHER TOTAL
	36917	ONE EYE MOD IMPAIR/OTH NEAR TOT
	36918	ONE EYE MOD IMPAIR/OTH PROFOUND
	36920	LOW VISION BOTH EYES NOS
	36921	ONE EYE SEV IMPAIR/OTH EYE NOS
	36922	SEVERE VISUAL IMPAIR BOTH EYES
	36923	ONE EYE MOD IMPAIR/OTH EYE NOS
	36924	ONE EYE MOD IMPAIR/OTHER SEVERE
	36925	MODERATE VIS IMPAIR BOTH EYES
	3693	UNQUALIFIED VIS LOSS BOTH EYES
	36960	PROFOUND IMPAIRMENT ONE EYE NOS
	36961	ONE EYE TOT IMPAIR/OTH EYE NOS
	36962	ONE EYE TOT IMPAR/OTH NEAR-NORM
	36963	ONE EYE TOTAL IMPAIR/OTH NORMAL
	36964	ONE EYE NEAR TOT IMPAIR/OTH NOS
	36965	ONE EYE NEAR TOT/OTH NEAR-NORM
	36966	ONE EYE NEAR TOTAL/OTHER NORMAL
	36967	ONE EYE PROFOUND IMPAIR/OTH NOS
	36968	ONE EYE PROFOUND/OTH NEAR-NORM
	36969	ONE EYE PROFOUND/OTHER NORMAL
	36970	MOD/SEVERE IMPAIR ONE EYE NOS
	36971	ONE EYE SEV IMPAIR/OTH EYE NOS
	36972	ONE EYE SEVERE/OTH NEAR-NORM
	36973	ONE EYE SEVERE IMPAIR/OTH NORM
	36974	ONE EYE MOD IMPAIR/OTH EYE NOS
	36975	ONE EYE MOD IMPAR/OTH NEAR-NORM
	36976	ONE EYE MOD IMPAIR/OTH EYE NORM
	3698	UNQUALIFIED VISUAL LOSS ONE EYE
	3699	UNSPECIFIED VISUAL LOSS
	37000	CORNEAL ULCER UNSPECIFIED
	37001	MARGINAL CORNEAL ULCER
	37002	RING CORNEAL ULCER

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
751-758 DIAG INV & MANAGEMENT OPHTHALMOLOGY		
	37003	CENTRAL CORNEAL ULCER
	37004	HYPOPYON ULCER
	37005	MYCOTIC CORNEAL ULCER
	37006	PERFORATED CORNEAL ULCER
	37007	MOOREN'S ULCER
	37020	SUPERFICIAL KERATITIS UNSPEC
	37021	PUNCTATE KERATITIS
	37022	MACULAR KERATITIS
	37023	FILAMENTARY KERATITIS
	37024	PHOTOKERATITIS
	37031	PHLYCTENULAR KERATOCONJUNCT
	37032	LIMBR/CORN INVOLV VERN CONJUNCT
	37033	KERATOCONJUNCTIVITIS SICCA
	37034	EXPOSURE KERATOCONJUNCTIVITIS
	37035	NEUROTROPHIC KERATOCONJUNCT
	37040	KERATOCONJUNCTIVITIS UNSPEC
	37044	KERATIT/KERATOCONJUNCT EXANTHMA
	37049	OTHER KERATOCONJUNCTIVITIS
	37050	INTERSTITIAL KERATITIS UNSPEC
	37052	DIFFUSE INTERSTITIAL KERATITIS
	37054	SCLEROSING KERATITIS
	37055	CORNEAL ABSCESS
	37059	OTHER INTERSTITIAL KERATITIS
	37060	CORNEAL NEOVASCULARIZATION NOS
	37061	LOCAL VASCULARIZATION CORNEA
	37062	PANNUS (CORNEAL)
	37063	DEEP VASCULARIZATION OF CORNEA
	37064	GHOST VESSELS (CORNEAL)
	3708	OTHER FORMS OF KERATITIS
	3709	UNSPECIFIED KERATITIS
	37100	CORNEAL OPACITY UNSPECIFIED
	37101	MINOR OPACITY OF CORNEA
	37102	PERIPHERAL OPACITY OF CORNEA
	37103	CENTRAL OPACITY OF CORNEA
	37104	ADHERENT LEUCOMA
	37105	PHTHISICAL CORNEA
	37110	CORNEAL DEPOSIT UNSPECIFIED
	37111	ANTERIOR PIGMENTATIONS
	37112	STROMAL PIGMENTATIONS
	37113	POSTERIOR PIGMENTATIONS
	37114	KAYSER-FLEISCHER RING
	37115	OTH CORN DEPOSITS W MET DISORD
	37116	ARGENTOUS DEPOSITS
	37120	CORNEAL EDEMA UNSPECIFIED
	37121	IDIOPATHIC CORNEAL EDEMA
	37122	SECONDARY CORNEAL EDEMA
	37123	BULLOUS KERATOPATHY
	37124	CORNEAL EDEMA D/T CONTACT LENSE
	37130	CORNEAL MEMBRANE CHANGE UNSPEC
	37131	FOLDS/RUPTURE BOWMAN'S MEMBRANE
	37132	FOLDS IN DESCEMET'S MEMBRANE
	37133	RUPTURE IN DESCEMET'S MEMBRANE
	37140	CORNEAL DEGENERATION UNSPEC
	37141	SENILE CORNEAL CHANGES
	37142	RECURRENT EROSION OF CORNEA
	37143	BAND-SHAPED KERATOPATHY

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
751-758 DIAG INV & MANAGEMENT OPHTHALMOLOGY		
	37144	OTHER CALCEROUS DEGEN OF CORNEA
	37145	KERATOMALACIA NOS
	37146	NODULAR DEGENERATION OF CORNEA
	37148	PERIPHERAL DEGENERATIONS CORNEA
	37149	OTHER CORNEAL DEGENERATIONS
	37150	CORNEAL DYSTROPHY UNSPECIFIED
	37151	JUV EPITHELIAL CORN DYSTROPHY
	37152	OTH ANTERIOR CORNEAL DYSTROPHY
	37153	GRANULAR CORNEAL DYSTROPHY
	37154	LATTICE CORNEAL DYSTROPHY
	37155	MACULAR CORNEAL DYSTROPHY
	37156	OTH STROMAL CORNEAL DYSTROPHIES
	37157	ENDOTHELIAL CORNEAL DYSTROPHY
	37158	OTH POSTERIOR CORN DYSTROPHIES
	37160	KERATOCONUS UNSPECIFIED
	37161	KERATOCONUS STABLE CONDITION
	37162	KERATOCONUS ACUTE HYDROPS
	37170	CORNEAL DEFORMITY UNSPECIFIED
	37171	CORNEAL ECTASIA
	37172	DESCEMETOCELE
	37173	CORNEAL STAPHYLOMA
	37181	CORNEAL ANESTHESIA/HYPOESTHESIA
	37182	CORNEAL DISORD D/T CONTACT LENS
	37189	OTHER CORNEAL DISORDERS
	3719	UNSPECIFIED CORNEAL DISORDER
	37200	ACUTE CONJUNCTIVITIS UNSPEC
	37201	SEROUS CONJUNCTIVITIS EXC VIRAL
	37202	ACUTE FOLLICULAR CONJUNCTIVITIS
	37203	OTH MUCOPURULENT CONJUNCTIVITIS
	37204	PSEUDOMEMBRANOUS CONJUNCTIVITIS
	37205	ACUTE ATOPIC CONJUNCTIVITIS
	37210	CHRONIC CONJUNCTIVITIS UNSPEC
	37211	SIMPLE CHRONIC CONJUNCTIVITIS
	37212	CHR FOLLICULAR CONJUNCTIVITIS
	37213	VERNAL CONJUNCTIVITIS
	37214	OTH CHR ALLERGIC CONJUNCTIVITIS
	37215	PARASITIC CONJUNCTIVITIS
	37220	BLEPHAROCONJUNCTIVITIS UNSPEC
	37221	ANGULAR BLEPHAROCONJUNCTIVITIS
	37222	CONTACT BLEPHAROCONJUNCTIVITIS
	37230	CONJUNCTIVITIS UNSPECIFIED
	37231	ROSACEA CONJUNCTIVITIS
	37233	CONJUNCT IN MUCOCUTANEOUS DIS
	37239	OTHER CONJUNCTIVITIS
	37240	PTERYGIUM UNSPECIFIED
	37241	PERIPHERAL PTERYGIUM STATIONARY
	37242	PERIPH PTERYGIUM PROGRESSIVE
	37243	CENTRAL PTERYGIUM
	37244	DOUBLE PTERYGIUM
	37245	RECURRENT PTERYGIUM
	37250	CONJUNCTIVAL DEGENERATION NOS
	37251	PINGUECULA
	37252	PSEUDOPTERYGIUM
	37253	CONJUNCTIVAL XEROSIS
	37254	CONJUNCTIVAL CONCRETIONS
	37255	CONJUNCTIVAL PIGMENTATIONS

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
751-758 DIAG INV & MANAGEMENT OPHTHALMOLOGY		
	37256	CONJUNCTIVAL DEPOSITS
	37261	GRANULOMA OF CONJUNCTIVA
	37262	LOCAL ADHESION/STRANDS CONJUNCT
	37263	SYMBLEPHARON
	37264	SCARRING OF CONJUNCTIVA
	37271	HYPEREMIA OF CONJUNCTIVA
	37272	CONJUNCTIVAL HEMORRHAGE
	37273	CONJUNCTIVAL EDEMA
	37274	VASC ABNORMALITIES CONJUNCTIVA
	37275	CONJUNCTIVAL CYSTS
	3728	OTHER DISORDERS OF CONJUNCTIVA
	3729	UNSPECIFIED DISORD CONJUNCTIVA
	37300	BLEPHARITIS UNSPECIFIED
	37301	ULCERATIVE BLEPHARITIS
	37302	SQUAMOUS BLEPHARITIS
	37311	HORDEOLUM EXTERNUM
	37312	HORDEOLUM INTERNUM
	37313	ABSCESS OF EYELID
	3732	CHALAZION
	37331	ECZEMATOUS DERMATITIS EYELID
	37332	CONTACT/ALLERG DERMATIT EYELID
	37333	XERODERMA OF EYELID
	37334	DISCOID LUPUS ERYTHEMAT EYELID
	3734	INFECT DERMATIT EYELID W DEFORM
	3735	OTH INFECTIVE DERMATITIS EYELID
	3736	PARASITIC INFESTATION OF EYELID
	3738	OTHER INFLAMMATIONS OF EYELIDS
	3739	UNSPEC INFLAMMATION OF EYELID
	37400	ENTROPION UNSPECIFIED
	37401	SENILE ENTROPION
	37402	MECHANICAL ENTROPION
	37403	SPASTIC ENTROPION
	37404	CICATRICIAL ENTROPION
	37405	TRICHIASIS WITHOUT ENTROPION
	37410	ECTROPION UNSPECIFIED
	37411	SENILE ECTROPION
	37412	MECHANICAL ECTROPION
	37413	SPASTIC ECTROPION
	37414	CICATRICIAL ECTROPION
	37420	LAGOPHTHALMOS UNSPECIFIED
	37421	PARALYTIC LAGOPHTHALMOS
	37422	MECHANICAL LAGOPHTHALMOS
	37423	CICATRICIAL LAGOPHTHALMOS
	37430	PTOSIS OF EYELID UNSPECIFIED
	37431	PARALYTIC PTOSIS
	37432	MYOGENIC PTOSIS
	37433	MECHANICAL PTOSIS
	37434	BLEPHAROCHALASIS
	37441	LID RETRACTION OR LAG
	37443	ABNORMAL INNERVATION SYNDROME
	37444	SENSORY DISORD EYELID FUNCTION
	37445	OTH SENSORIMOTOR DISORD EYELID
	37446	BLEPHAROPHIMOSIS
	37450	DEGEN DISORDER EYELIDS UNSPEC
	37452	HYPERPIGMENTATION OF EYELID
	37453	HYPOPIGMENTATION OF EYELID

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
751-758 DIAG INV & MANAGEMENT OPHTHALMOLOGY		
	37454	HYPERTRICHOSIS OF EYELID
	37455	HYPOTRICHOSIS OF EYELID
	37456	OTH DEGEN DISORDER SKIN EYELID
	37481	HEMORRHAGE OF EYELID
	37482	EDEMA OF EYELID
	37483	ELEPHANTIASIS OF EYELID
	37484	CYSTS OF EYELIDS
	37485	VASCULAR ANOMALIES OF EYELID
	37486	RETAINED FOREIGN BODY OF EYELID
	37487	DERMATOCHALASIS
	37489	OTHER DISORDERS OF EYELID
	3749	UNSPECIFIED DISORDER OF EYELID
	37500	DACRYOADENITIS UNSPECIFIED
	37501	ACUTE DACRYOADENITIS
	37502	CHRONIC DACRYOADENITIS
	37503	CHR ENLARGEMENT LACRIMAL GLAND
	37511	DACRYOPS
	37512	OTH LACRIMAL CYSTS/CYSTIC DEGEN
	37513	PRIMARY LACRIMAL ATROPHY
	37514	SECONDARY LACRIMAL ATROPHY
	37515	TEAR FILM INSUFFICIENCY UNSPEC
	37516	DISLOCATION OF LACRIMAL GLAND
	37520	EPIPHORA UNSPECIFIED CAUSE
	37521	EPIPHORA D/T EXCESS LACRIMATION
	37522	EPIPHORA DUE TO INSUFF DRAINAGE
	37530	DACRYOCYSTITIS UNSPECIFIED
	37531	ACUTE CANALICULITIS LACRIMAL
	37532	ACUTE DACRYOCYSTITIS
	37533	PHLEGMONOUS DACRYOCYSTITIS
	37541	CHRONIC CANALICULITIS
	37542	CHRONIC DACRYOCYSTITIS
	37543	LACRIMAL MUCOCELE
	37551	EVERSION OF LACRIMAL PUNCTUM
	37552	STENOSIS OF LACRIMAL PUNCTUM
	37553	STENOSIS OF LACRIMAL CANALICULI
	37554	STENOSIS OF LACRIMAL SAC
	37555	OBSTRUCT NASOLACRIM DUCT NEONAT
	37556	STENOS NASOLACRIM DUCT ACQUIRED
	37557	DACRYOLITH
	37561	LACRIMAL FISTULA
	37569	OTHER CHANGES LACRIMAL PASSAGES
	37581	GRANULOMA OF LACRIMAL PASSAGES
	37589	OTHER DISORDERS LACRIMAL SYSTEM
	3759	UNSPEC DISORDER LACRIMAL SYSTEM
	37600	ACUTE INFLAMMATION OF ORBIT NOS
	37601	ORBITAL CELLULITIS
	37602	ORBITAL PERIOSTITIS
	37603	ORBITAL OSTEOMYELITIS
	37604	TENONITIS
	37610	CHRONIC INFLAMMATION ORBIT NOS
	37611	ORBITAL GRANULOMA
	37612	ORBITAL MYOSITIS
	37613	PARASITIC INFESTATION OF ORBIT
	37621	THYROTOXIC EXOPHTHALMOS
	37622	EXOPHTHALMIC OPHTHALMOPLEGIA
	37630	EXOPHTHALMOS UNSPECIFIED

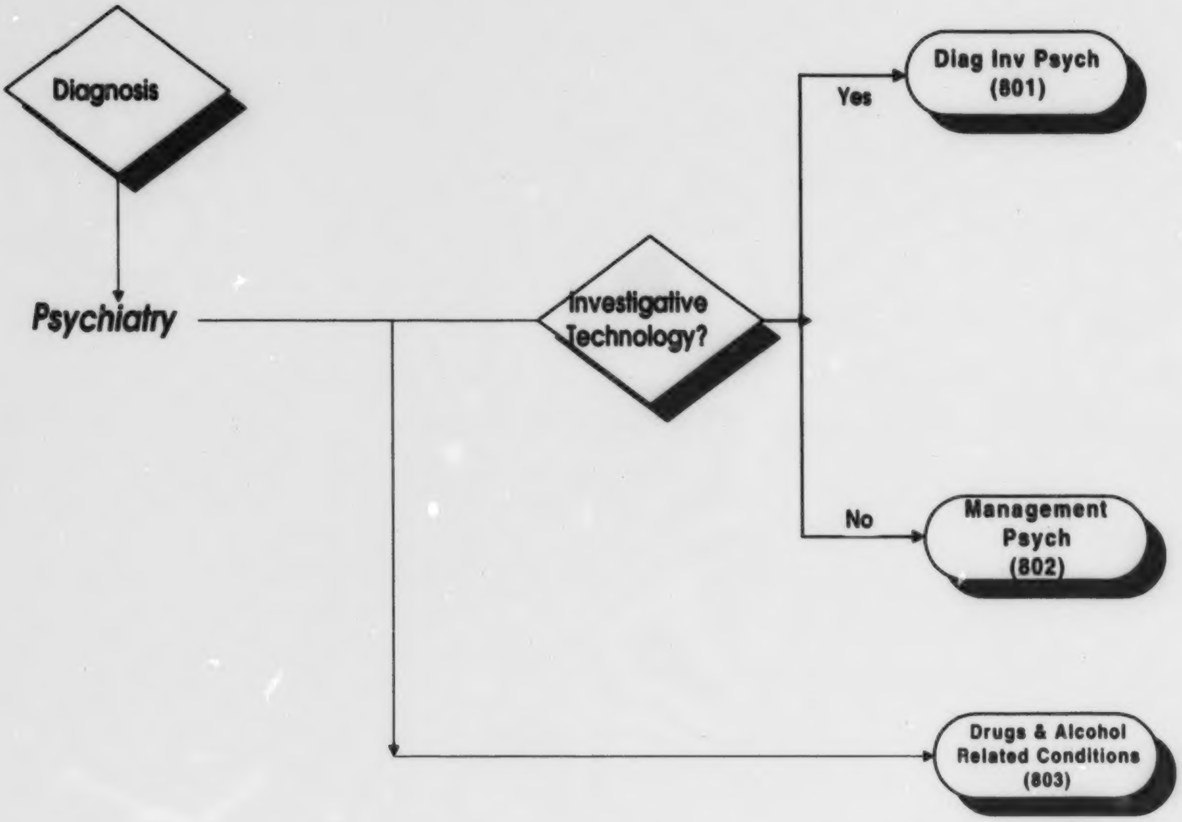
ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
751-758 DIAG INV & MANAGEMENT OPHTHALMOLOGY		
	37631	CONSTANT EXOPHTHALMOS
	37632	ORBITAL HEMORRHAGE
	37633	ORBITAL EDEMA OR CONGESTION
	37634	INTERMITTENT EXOPHTHALMOS
	37635	PULSATING EXOPHTHALMOS
	37636	LATERAL DISPLACEMENT OF GLOBE
	37640	DEFORMITY OF ORBIT UNSPECIFIED
	37641	HYPERTELORISM OF ORBIT
	37642	EXOSTOSIS OF ORBIT
	37643	LOCAL DEFORMITIES D/T BONE DIS
	37644	ORBIT DEFORM W CRANIOFAC DEFORM
	37645	ATROPHY OF ORBIT
	37646	ENLARGEMENT OF ORBIT
	37647	DEFORMITY D/T TRAUMA OR SURGERY
	37650	ENOPHTHALMOS UNSPECIFIED CAUSE
	37651	ENOPHTHALMOS D/T ATROPHY ORBIT
	37652	ENOPHTHALMOS D/T TRAUMA/SURGERY
	3766	RETAIN(OLD) FB FOLL WOUND ORBIT
	37681	ORBITAL CYSTS
	37682	MYOPATHY OF EXTRAOCULAR MUSCLES
	37689	OTHER ORBITAL DISORDERS
	3769	UNSPECIFIED DISORDER OF ORBIT
	37700	PAPILLEDEMA UNSPECIFIED
	37701	PAPILLEDEMA INCR INTRACRAN PRES
	37702	PAPILLEDEMA W DECR OCULAR PRESS
	37703	PAPILLEDEMA W RETINAL DISORDER
	37721	DRUSEN OF OPTIC DISC
	37722	CRATER-LIKE HOLES OF OPTIC DISC
	37723	COLOBOMA OF OPTIC DISC
	37724	PSEUDOPAPILLEDEMA
	37730	OPTIC NEURITIS UNSPECIFIED
	37731	OPTIC PAPILLITIS
	37732	RETROBULBAR NEURITIS (ACUTE)
	37733	NUTRITIONAL OPTIC NEUROPATHY
	37734	TOXIC OPTIC NEUROPATHY
	37739	OTHER OPTIC NEURITIS
	37741	ISCHEMIC OPTIC NEUROPATHY
	37742	HEMORRHAGE OPTIC NERVE SHEATHS
	37749	OTHER DISORDERS OF OPTIC NERVE
	37800	ESOTROPIA UNSPECIFIED
	37801	MONOCULAR ESOTROPIA
	37802	MONOCULAR ESOTROPIA W A PATTERN
	37803	MONOCULAR ESOTROPIA W V PATTERN
	37804	MONOCULAR ESOTROPIA W OTH NONCM
	37805	ALTERNATING ESOTROPIA
	37806	ALTERNAT ESOTROPIA W A PATTERN
	37807	ALTERNAT ESOTROPIA W V PATTERN
	37808	ALTERNAT ESOTROPIA W OTH NONCM
	37810	EXOTROPIA UNSPECIFIED
	37811	MONOCULAR EXOTROPIA
	37812	MONOCULAR EXOTROPIA W A PATTERN
	37813	MONOCULAR EXOTROPIA W V PATTERN
	37814	MONOCULAR EXOTROPIA W OTH NONCM
	37815	ALTERNATING EXOTROPIA
	37816	ALTERNAT EXOTROPIA W A PATTERN
	37817	ALTERNAT EXOTROPIA W V PATTERN

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
751-758 DIAG INV & MANAGEMENT OPHTHALMOLOGY		
	37818	ALTERNAT EXOTROPIA W OTH NONCM
	37820	INTERMITTENT HETEROTROPIA NOS
	37821	INTERMIT ESOTROPIA MONOCULAR
	37822	INTERMIT ESOTROPIA ALTERNATING
	37823	INTERMIT EXOTROPIA MONOCULAR
	37824	INTERMIT EXOTROPIA ALTERNATING
	37830	HETEROTROPIA UNSPECIFIED
	37831	HYPERTROPIA
	37832	HYPOTROPIA
	37833	CYCLOTROPIA
	37834	MONOFIXATION SYNDROME
	37835	ACCOM COMPONENT IN ESOTROPIA
	37840	HETEROPHORIA UNSPECIFIED
	37841	ESOPHORIA
	37842	EXOPHORIA
	37843	VERTICAL HETEROPHORIA
	37844	CYCLOPHORIA
	37845	ALTERNATING HYPERPHORIA
	37850	PARALYTIC STRABISMUS UNSPEC
	37851	THIRD/OCULOMOTOR NRV PALSY PART
	37852	THIRD/OCULOMOTOR NRV PALSY TOT
	37853	FOURTH/TROCHLEAR NERVE PALSY
	37854	SIXTH/ABDUCENS NERVE PALSY
	37855	EXTERNAL OPHTHALMOPLEGIA
	37856	TOTAL OPHTHALMOPLEGIA
	37860	MECHANICAL STRABISMUS UNSPEC
	37861	BROWN'S (TENDON)SHEATH SYNDROME
	37862	MECH STRABIS OTH MUSCULO DISORD
	37863	LIMITED DUCTION W OTH CONDITION
	37871	DUANE'S SYNDROME
	37872	PROGRESSIVE EXT OPHTHALMOPLEGIA
	37873	STRABISMUS IN OTH NEUROMUSC DIS
	37881	PALSY OF CONJUGATE GAZE
	37882	SPASM OF CONJUGATE GAZE
	37883	CONVERGENCE INSUFFICIENCY/PALSY
	37884	CONVERGENCE EXCESS OR SPASM
	37885	ANOMALIES OF DIVERGENCE
	37887	OTH DISSOCIATED DEVIAT EYE MOVE
	3789	UNSPEC DISORDER EYE MOVEMENTS
	37900	SCLERITIS UNSPECIFIED
	37901	EPISCLERITIS PERIODICA FUGAX
	37902	NODULAR EPISCLERITIS
	37903	ANTERIOR SCLERITIS
	37904	SCLEROMALACIA PERFORANS
	37905	SCLERITIS W CORNEAL INVOLVEMENT
	37906	BRAWNY SCLERITIS
	37907	POSTERIOR SCLERITIS
	37909	OTHER SCLERITIS/EPISCLERITIS
	37911	SCLERAL ECTASIA
	37912	STAPHYLOMA POSTICUM
	37913	EQUATORIAL STAPHYLOMA
	37914	ANTERIOR STAPHYLOMA LOCALIZED
	37915	RING STAPHYLOMA
	37916	OTH DEGENERATIVE DISORD SCLERA
	37919	OTHER DISORDERS OF SCLERA
	37921	VITREOUS DEGENERATION

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
751-758 DIAG INV & MANAGEMENT OPHTHALMOLOGY		
	37922	CRYSTALLINE DEPOSITS VITREOUS
	37923	VITREOUS HEMORRHAGE
	37924	OTHER VITREOUS OPACITIES
	37925	VITREOUS MEMBRANES AND STRANDS
	37926	VITREOUS PROLAPSE
	37929	OTHER DISORDERS OF VITREOUS
	37931	APHAKIA
	37932	SUBLUXATION OF LENS
	37933	ANTERIOR DISLOCATION OF LENS
	37934	POSTERIOR DISLOCATION OF LENS
	37939	OTHER DISORDERS OF LENS
	37940	ABNORMAL PUPILLARY FUNCTION NOS
	37941	ANISOCORIA
	37942	MIOSIS (PERSIST) NOT D/T MIOTIC
	37943	MYDRIASIS (PERSIST) NOT D/T MYD
	37945	ARGYLL ROBERTSON PUPIL ATYPICAL
	37946	TONIC PUPILLARY REACTION
	37949	OTHER ANOMALIES PUPILLARY FUNCT
	37950	NYSTAGMUS UNSPECIFIED
	37951	CONGENITAL NYSTAGMUS
	37952	LATENT NYSTAGMUS
	37953	VISUAL DEPRIVATION NYSTAGMUS
	37954	NYSTAGMUS DISORD VESTIBULAR SYS
	37955	DISSOCIATED NYSTAGMUS
	37956	OTHER FORMS OF NYSTAGMUS
	37957	DEFICIENCIES SACCADIC EYE MOVE
	37958	DEFIC SMOOTH PURSUIT MOVEMENTS
	37959	OTH IRREGULARITIES EYE MOVEMENT
	3798	OTH SPEC DISORD EYE AND ADNEXA
	37990	DISORDER OF EYE UNSPECIFIED
	37991	PAIN IN OR AROUND EYE
	37992	SWELLING OR MASS OF EYE
	37993	REDNESS OR DISCHARGE OF EYE
	37999	OTHER ILL-DEFINED DISORDERS EYE
	6941	SUBCORNEAL PUSTULAR DERMATOSIS
	69461	BEN MUC MEMB PENPHIGOID W OCUL
	74300	CLINICAL ANOPHTHALMOS UNSPEC
	74303	CYSTIC EYEBALL CONGENITAL
	74306	CRYPTOPHTHALMOS
	74310	MICROPHTHALMOS UNSPECIFIED
	74311	SIMPLE MICROPHTHALMOS
	74312	MICROPHTHALMOS W OTH ANOM EYE
	74320	BUPHTHALMOS UNSPECIFIED
	74321	SIMPLE BUPHTHALMOS
	74322	BUPHTHALMOS W OTHER OCULAR ANOM
	74330	CONGENITAL CATARACT UNSPECIFIED
	74331	CONGEN CAPS/SUBCAPS CATARACT
	74332	CONGEN CORT/ZONULAR CATARACT
	74333	CONGENITAL NUCLEAR CATARACT
	74334	TOTAL/SUBTOTAL CATARACT CONGEN
	74335	CONGENITAL APHAKIA
	74336	ANOMALIES OF LENS SHAPE
	74337	CONGENITAL ECTOPIC LENS
	74339	OTHER CONGEN CATARACT/LENS ANOM
	74341	ANOMALIES OF CORNEAL SIZE/SHAPE
	74342	CONGEN CORNEAL OPAC AFFECT VIS

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
751-758 DIAG INV & MANAGEMENT OPHTHALMOLOGY		
	74343	OTHER CONGEN CORNEAL OPACITIES
	74344	SPEC ANOM ANT CHAMBER/ANGLE/REL
	74345	ANIRIDIA
	74346	OTH SPEC ANOM IRIS/CILIARY BODY
	74347	SPECIFIED ANOMALIES OF SCLERA
	74348	MULT/COMBIN ANOM ANT SEGMENT
	74349	OTH ANOMALIES ANTERIOR SEGMENT
	74351	VITREOUS ANOMALIES
	74352	FUNDUS COLOBOMA
	74353	CHORIORETINAL DEGEN CONGENITAL
	74354	CONGEN FOLDS/CYSTS POST SEGMENT
	74355	CONGENITAL MACULAR CHANGES
	74356	OTH RETINAL CHANGES CONGENITAL
	74357	SPECIFIED ANOMALIES OPTIC DISC
	74358	VASCULAR ANOMALIES POST SEGMENT
	74359	OTHER CONGEN ANOM POST SEGMENT
	74361	CONGENITAL PTOSIS
	74362	CONGENITAL DEFORMITIES EYELIDS
	74363	OTH SPEC CONGENITAL ANOM EYELID
	74364	SPEC CONGEN ANOM LACRIMAL GLAND
	74365	SPEC CONGEN ANOM LACRIM PASSAGE
	74366	SPEC CONGENITAL ANOMALIES ORBIT
	74369	OTHER ANOM EYELID/LACRIM/ORBIT
	7438	OTHER SPECIFIED ANOMALIES EYE
	7439	UNSPECIFIED ANOMALY OF EYE
	79411	ABNORM RETINAL FUNCTION STUDIES
	79412	ABNORMAL ELECTRO-OCULOGRAM
	79413	ABNORMAL VIS EVOKED POTENTIAL
	79414	ABNORMAL OCULOMOTOR STUDIES
	9180	SUPRFIC INJ EYELIDS/PERIOCULAR
	9181	SUPERFICIAL INJURY CORNEA
	9182	SUPERFICIAL INJURY CONJUNCTIVA
	9189	OTHER/NOS SUPRFIC INJURIES EYE
	99651	MECH COMPLICATION CORNEAL GRAFT
	99653	MECH COMPL OCULAR LENS PROSTH
	99882	CATARACT FRAG FOLL EYE/CAT SURG
	V425	CORNEA REPLACED BY TRANSPLANT
	V430	EYE GLOBE REPLACED OTHER MEANS
	V431	LENS REPLACED BY OTHER MEANS
	V4561	CATARACT EXTRACTION STATUS
	V4569	OTHER STATUS FOLLOWING SURGERY OF EYE AND ADNEXA
	V522	FITTING/ADJUST ARTIFICIAL EYE
	V531	FIT/ADJUST SPECTACLES/CONT LENS
	V720	EXAMINATION OF EYES AND VISION
	V410	PROBLEMS WITH SIGHT
	V411	OTHER EYE PROBLEMS

Psychiatry
Clinical Grouping


Diagnosis
Psychiatry
Investigative Technology?
Yes
Diag Inv Psych (801)
No
Management Psych (802)
Drugs & Alcohol Related Conditions (803)

ACCS Grouper
04/00

ACCS CELL
801-802 Psychiatry

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
801-802 DIAG INV & MANAGEMENT PSYCHIATRY		
	2900	SENILE DEMENTIA UNCOMPLICATED
	29010	PRESENILE DEMENTIA UNCOMPL
	29011	PRESENILE DEMENTIA W DELIRIUM
	29012	PRESENILE DEMENTIA W DELUSION
	29013	PRESENILE DEMENTIA W DEPRESS
	29020	SENILE DEMENTIA WITH DELUSION
	29021	SENILE DEMENTIA WITH DEPRESS
	2903	SENILE DEMENTIA WITH DELIRIUM
	29040	ARTERIOSCLER DEMENTIA UNCOMPL
	29041	ARTERIOSCLER DEMENT W DELIRIUM
	29042	ARTERIOSCLER DEMENT W DELUSION
	29043	ARTERIOSCLER DEMENT W DEPRESS
	2908	OTH SPEC SENILE PSYCHOTIC COND
	2909	UNSPEC SENILE PSYCHOTIC COND
	2930	ACUTE DELIRIUM
	2931	SUBACUTE DELIRIUM
	29381	ORGANIC DELUSIONAL SYNDROME
	29382	ORGANIC HALLUCINOSIS SYNDROME
	29383	ORGANIC AFFECTIVE SYNDROME
	29384	ORGANIC ANXIETY SYNDROME
	29389	OTH TRANSIENT ORG MENTAL DISORD
	2939	UNSPEC TRANSIENT ORG MENT COND
	2940	AMNESTIC SYNDROME
	2941	DEMENT IN COND CLASS ELSEWHERE
	2948	OTH SPEC ORG BRAIN SYND (CHR)
	2949	UNSPEC ORGANIC BRAIN SYND (CHR)
	29500	SIMPLE SCHIZOPHRENIC DISORD NOS
	29501	SIMPLE SCHIZO DISORD SUBCHRONIC
	29502	SIMPLE SCHIZO DISORD CHRONIC
	29503	SIMP SCHIZO DISORD SUBCHR/EXAC
	29504	SIMPLE SCHIZO DISORD CHR/EXAC
	29505	SIMPLE SCHIZO DISORD REMISSION
	29510	DISORG SCHIZOPHRENIC DISORD NOS
	29511	DISORG SCHIZO DISORD SUBCHRONIC
	29512	DISORG SCHIZO DISORD CHRONIC
	29513	DISORG SCHIZO DISORD SBCHR/EXAC
	29514	DISORG SCHIZO DISORD CHR/EXAC
	29515	DISORG SCHIZO DISORD REMISSION
	29520	CATATONIC SCHIZO DISORDER NOS
	29521	CATATONIC SCHIZO DISORD SUBCHR
	29522	CATATONIC SCHIZO DISORD CHRONIC
	29523	CATAT SCHIZO DISORD SUBCHR/EXAC
	29524	CATAT SCHIZO DISORDER CHR/EXAC
	29525	CATATON SCHIZO DISORD REMISSION
	29530	PARANOID SCHIZO DISORDER NOS
	29531	PARANOID SCHIZO DISORDER SUBCHR
	29532	PARANOID SCHIZO DISORD CHRONIC
	29533	PARAN SCHIZO DISORD SUBCHR/EXAC
	29534	PARANOID SCHIZO DISORD CHR/EXAC
	29535	PARAN SCHIZO DISORD REMISSION
	29540	ACUTE SCHIZOPHRENIC EPISODE NOS
	29541	ACUTE SCHIZO EPISODE SUBCHRONIC

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
801-802 DIAG INV & MANAGEMENT PSYCHIATRY		
	29542	ACUTE SCHIZO EPISODE CHRONIC
	29543	AC SCHIZO EPISODE SUBCHR/EXAC
	29544	ACUTE SCHIZO EPISODE CHR/EXAC
	29545	ACUTE SCHIZO EPISODE REMISSION
	29550	LATENT SCHIZOPHRENIA NOS
	29551	LATENT SCHIZOPHRENIA SUBCHRONIC
	29552	LATENT SCHIZOPHRENIA CHRONIC
	29553	LATENT SCHIZO SUBCHRONIC/EXAC
	29554	LATENT SCHIZOPHRENIA CHR/EXAC
	29555	LATENT SCHIZOPHRENIA REMISSION
	29560	RESIDUAL SCHIZOPHRENIA NOS
	29561	RESIDUAL SCHIZOPHRENIA SUBCHR
	29562	RESIDUAL SCHIZOPHRENIA CHRONIC
	29563	RESID SCHIZOPHRENIA SUBCHR/EXAC
	29564	RESIDUAL SCHIZOPHRENIA CHR/EXAC
	29565	RESID SCHIZOPHRENIA REMISSION
	29570	SCHIZOAFFECTIVE DISORDER NOS
	29571	SCHIZOAFFECTIVE DISORDER SUBCHR
	29572	SCHIZOAFFECTIVE DISORDER CHR
	29573	SCHIZOAFFECT DISORD SUBCHR/EXAC
	29574	SCHIZOAFFECTIVE DISORD CHR/EXAC
	29575	SCHIZOAFFECT DISORD REMISSION
	29580	OTHER SPEC SCHIZOPHRENIA NOS
	29581	OTH SPEC SCHIZOPHRENIA SUBCHR
	29582	OTH SPEC SCHIZOPHRENIA CHRONIC
	29583	OTH SPEC SCHIZO SUBCHRONIC/EXAC
	29584	OTH SPEC SCHIZOPHRENIA CHR/EXAC
	29585	OTH SPEC SCHIZO REMISSION
	29590	UNSPECIFIED SCHIZOPHRENIA NOS
	29591	UNSPEC SCHIZOPHRENIA SUBCHRONIC
	29592	UNSPEC SCHIZOPHRENIA CHRONIC
	29593	UNSPEC SCHIZO SUBCHRONIC/EXAC
	29594	UNSPEC SCHIZOPHRENIA CHR/EXAC
	29595	UNSPEC SCHIZOPHRENIA REMISSION
	29600	MANIC DISORD SINGLE EPISODE NOS
	29601	MANIC DISORD SINGLE EP MILD
	29602	MANIC DISORD SINGLE EP MODERATE
	29603	MANIC DISORD SINGLE EP SEVERE
	29604	MANIC DISORD SINGLE SEV W PSYCH
	29605	MANIC DISORD SINGLE PART REMIS
	29606	MANIC DISORD SINGLE FULL REMIS
	29610	MANIC DISORDER RECURRENT NOS
	29611	MANIC DISORDER RECURRENT MILD
	29612	MANIC DISORDER RECURRENT MOD
	29613	MANIC DISORDER RECURRENT SEVERE
	29614	MANIC DISORD RECUR SEV W PSYCH
	29615	MANIC DISORDER RECUR PART REMIS
	29616	MANIC DISORDER RECUR FULL REMIS
	29620	MAJOR DEPRESSIVE SINGLE EP NOS
	29621	MAJOR DEPRESSIVE SINGLE EP MILD
	29622	MAJOR DEPRESSIVE SINGLE EP MOD
	29623	MAJOR DEPRESS SINGLE EP SEVERE
	29624	MAJOR DEPRESS SINGLE EP W PSYCH
	29625	MAJ DEPRESS SING EP PART REMIS
	29626	MAJ DEPRESS SING EP FULL REMIS
	29630	MAJOR DEPRESSIVE RECURRENT NOS

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
801-802 DIAG INV & MANAGEMENT PSYCHIATRY		
	29631	MAJOR DEPRESSIVE RECURRENT MILD
	29632	MAJOR DEPRESSIVE RECURRENT MOD
	29633	MAJ DEPRESSIVE RECURRENT SEVERE
	29634	MAJ DEPRESS RECUR SEV W PSYCH
	29635	MAJ DEPRESSIVE RECUR PART REMIS
	29636	MAJ DEPRESSIVE RECUR FULL REMIS
	29640	BIPOLAR AFFECT DISORD MANIC NOS
	29641	BIPOL AFFECT DISORD MANIC MILD
	29642	BIPOLAR AFFECT DISORD MANIC MOD
	29643	BIPOLAR AFFECT DISORD MANIC SEV
	29644	BIPOL AFFECT MANIC SEV W PSYCH
	29645	BIPOLAR AFFECT MANIC PART REMIS
	29646	BIPOLAR AFFECT MANIC FULL REMIS
	29650	BIPOLAR AFFECTIVE DEPRESSED NOS
	29651	BIPOLAR AFFECTIVE DEPRESS MILD
	29652	BIPOLAR AFFECTIVE DEPRESSED MOD
	29653	BIPOLAR AFFECT DEPRESSED SEVERE
	29654	BIPOL AFFECT DEPRES SEV W PSYCH
	29655	BIPOL AFFECT DEPRESS PART REMIS
	29656	BIPOL AFFECT DEPRESS FULL REMIS
	29660	BIPOLAR AFFECT DISORD MIXED NOS
	29661	BIPOL AFFECT DISORD MIXED MILD
	29662	BIPOLAR AFFECT DISORD MIXED MOD
	29663	BIPOLAR AFFECT DISORD MIXED SEV
	29664	BIPOL AFFECT MIXED SEV W PSYCH
	29665	BIPOLAR AFFECT MIXED PART REMIS
	29666	BIPOLAR AFFECT MIXED FULL REMIS
	2967	BIPOLAR AFFECTIVE DISORD UNSPEC
	29680	MANIC-DEPRESSIVE PSYCHOSIS NOS
	29681	ATYPICAL MANIC DISORDER
	29682	ATYPICAL DEPRESSIVE DISORDER
	29689	OTH MANIC-DEPRESSIVE PSYCHOSIS
	29690	UNSPECIFIED AFFECTIVE PSYCHOSIS
	29699	OTHER SPEC AFFECTIVE PSYCHOSES
	2970	PARANOID STATE SIMPLE
	2971	PARANOIA
	2972	PARAPHRENIA
	2973	SHARED PARANOID DISORDER
	2978	OTHER SPECIFIED PARANOID STATES
	2979	UNSPECIFIED PARANOID STATE
	2980	DEPRESSIVE TYPE PSYCHOSIS
	2981	EXCITATIVE TYPE PSYCHOSIS
	2982	REACTIVE CONFUSION
	2983	ACUTE PARANOID REACTION
	2984	PSYCHOGENIC PARANOID PSYCHOSIS
	2988	OTHER/UNSPEC REACTIVE PSYCHOSIS
	2989	UNSPECIFIED PSYCHOSIS
	29900	INFANTILE AUTISM ACTIVE
	29901	INFANTILE AUTISM RESIDUAL
	29910	DISINTEGRATIVE PSYCHOSIS ACTIVE
	29911	DISINTEGRATIVE PSYCHOSIS RESID
	29980	OTH EARLY CHILD PSYCH ACTIVE
	29981	OTH EARLY CHILD PSYCH RESIDUAL
	29990	PSYCH ORIG SPEC CHILD NOS ACT
	29991	PSYCH ORIG SPEC CHILD NOS RESID
	30000	ANXIETY STATE UNSPECIFIED

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
801-802 DIAG INV & MANAGEMENT PSYCHIATRY		
	30001	PANIC DISORDER
	30002	GENERALIZED ANXIETY DISORDER
	30009	OTHER ANXIETY STATES
	30010	HYSTERIA UNSPECIFIED
	30011	CONVERSION DISORDER
	30012	PSYCHOGENIC AMNESIA
	30013	PSYCHOGENIC FUGUE
	30014	MULTIPLE PERSONALITY
	30015	DISSOCIATIVE DISORDER/RXN NOS
	30016	FACTITIOUS ILLNESS PSYCH SYMPT
	30019	OTH/UNSPEC FACTITIOUS ILLNESS
	30020	PHOBIA UNSPECIFIED
	30021	AGORAPHOBIA WITH PANIC ATTACKS
	30022	AGORAPHOBIA NO PANIC ATTACKS
	30023	SOCIAL PHOBIA
	30029	OTH ISOLATED OR SIMPLE PHOBIAS
	3003	OBSESSIVE-COMPULSIVE DISORDERS
	3004	NEUROTIC DEPRESSION
	3005	NEURASTHENIA
	3006	DEPERSONALIZATION SYNDROME
	3007	HYPOCHONDRIASIS
	30081	SOMATIZATION DISORDER
	30082	UNDIFFERENTIATED NEUROTIC SOMATOFORM
	30089	OTHER NEUROTIC DISORDERS
	3009	UNSPECIFIED NEUROTIC DISORDER
	3010	PARANOID PERSONALITY DISORDER
	30110	AFFECT PERSONALITY DISORD NOS
	30111	CHR HYPOMANIC PERSON DISORDER
	30112	CHR DEPRESSIVE PERSON DISORDER
	30113	CYCLOTHYMIC DISORDER
	30120	SCHIZOID PERSONALITY DISORD NOS
	30121	INTROVERTED PERSONALITY
	30122	SCHIZOTYPAL PERSONALITY
	3013	EXPLOSIVE PERSONALITY DISORDER
	3014	COMPULSIVE PERSONALITY DISORDER
	30150	HISTRIONIC PERSON DISORDER NOS
	30151	CHR FACTITIOUS ILL PHYS SYMPT
	30159	OTH HISTRIONIC PERSON DISORDER
	3016	DEPENDENT PERSONALITY DISORDER
	3017	ANTISOCIAL PERSONALITY DISORDER
	30181	NARCISSISTIC PERSONALITY
	30182	AVOIDANT PERSONALITY
	30183	BORDERLINE PERSONALITY
	30184	PASSIVE-AGGRESSIVE PERSONALITY
	30189	OTHER PERSONALITY DISORDERS
	3019	UNSPEC PERSONALITY DISORDER
	3020	EGO-DYSTONIC HOMOSEXUALITY
	3021	ZOOPHILIA
	3022	PEDOPHILIA
	3023	TRANSVESTISM
	3024	EXHIBITIONISM
	30250	TRANS-SEXUALISM W UNSPEC SEX HX
	30251	TRANS-SEXUALISM WITH ASEXUAL HX
	30252	TRANS-SEXUALISM W HOMOSEXUAL HX
	30253	TRANS-SEXUALISM W HETEROSEX HX
	3026	DISORDERS PSYCHOSEXUAL IDENTITY

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
801-802 DIAG INV & MANAGEMENT PSYCHIATRY		
	30270	PSYCHOSEXUAL DYSFUNCTION UNSPEC
	30271	PSYCHOSEX DYSFUNCT INHIB DESIRE
	30272	PSYCHOSEX DYSFUNCT INHIB EXCITE
	30273	PSYCHOSEX DYSFUNCT INH F ORGASM
	30274	PSYCHOSEX DYSFUNCT INH M ORGASM
	30275	PSYCHOSEX DYSFUNCT W PREM EJAC
	30276	PSYCHOSEX DYSFUNCT DYSPAREUNIA
	30279	OTH SPEC PSYCHOSEXUAL DYSFUNCT
	30281	FETISHISM
	30282	VOYEURISM
	30283	SEXUAL MASOCHISM
	30284	SEXUAL SADISM
	30285	GENDER IDENT DISORD ADOL/ADULT
	30289	OTH SPEC PSYCHOSEXUAL DISORDERS
	3029	UNSPECIFIED PSYCHOSEXUAL DISORD
	3067	SENSE ORGAN MALFUNCT MENT FACT
	3068	OTH SPEC PSYCHOPHYS MALFUNCT
	3069	UNSPEC PSYCHOPHYS MALFUNCTION
	3070	STAMMERING AND STUTTERING
	3071	ANOREXIA NERVOSA
	30720	TIC DISORDER UNSPECIFIED
	30721	TRANSIENT TIC DISORD CHILDHOOD
	30722	CHRONIC MOTOR TIC DISORDER
	30723	GILLES DE LA TOURETTE'S DISORD
	3073	STEREOTYPED REPETITIVE MOVEMENT
	30740	NONORGANIC SLEEP DISORDER NOS
	30741	TRANSNT DISORD INIT/MAINT SLEEP
	30742	PERSIST DISORD INIT/MAINT SLEEP
	30743	TRANSNT DISORD INIT/MAINT WAKE
	30744	PERSIST DISORD INIT/MAINT WAKE
	30745	PHASE-SHIFT DISRUPT SLEEP-WAKE
	30746	SOMNAMBULISM OR NIGHT TERRORS
	30747	OTH DYSFUNTION SLEEP/AROUSAL FR
	30748	REPETITIVE INTRUSIONS OF SLEEP
	30749	OTH SPEC NONORG DISORDER SLEEP
	30750	EATING DISORDER UNSPECIFIED
	30751	BULIMIA
	30752	PICA
	30753	PSYCHOGENIC RUMINATION
	30754	PSYCHOGENIC VOMITING
	30759	OTHER DISORDERS OF EATING
	3076	ENURESIS
	3077	ENCOPRESIS
	30780	PSYCHOGENIC PAIN SITE UNSPEC
	30789	OTHER PSYCHALGIA
	3079	OTH/UNSPEC SYMPTOMS/SYND NEC
	3080	AC RXN STRESS DISTURB EMOTIONS
	3081	AC RXN STRESS DISTURB CONSCIOUS
	3082	AC RXN STRESS PSYCHOMOT DISTURB
	3083	OTHER ACUTE REACTIONS TO STRESS
	3084	MIXED DISORD AS STRESS REACTION
	3089	UNSPEC ACUTE REACTION TO STRESS
	3090	BRIEF DEPRESSIVE REACTION
	3091	PROLONGED DEPRESSIVE REACTION
	30921	SEPARATION ANXIETY DISORDER
	30922	EMANCIPATION DISORD ADOL/ADULT

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
801-802 DIAG INV & MANAGEMENT PSYCHIATRY		
	30923	SPECIFIC ACADEMIC/WORK INHIB
	30924	ADJUSTMENT RXN W ANXIOUS MOOD
	30928	ADJUST RXN W MIXED EMOT FEATURE
	30929	OTH ADJUST RXN W DISTURB EMOT
	3093	ADJUST RXN W DISTURB CONDUCT
	3094	ADJUST RXN W MIXED DISTURBANCE
	30981	PROLONG POSTTRAUM STRESS DISORD
	30982	ADJUSTMENT RXN W PHYSICAL SYMPT
	30983	ADJUSTMENT RXN WITH WITHDRAWAL
	30989	OTHER SPEC ADJUSTMENT REACTIONS
	3099	UNSPECIFIED ADJUSTMENT REACTION
	3100	FRONTAL LOBE SYNDROME
	3101	ORGANIC PERSONALITY SYNDROME
	3102	POSTCONCUSSION SYNDROME
	3108	OTH MENT DISORD FOLL BRAIN DAM
	3109	MENT DISORD FOLL BRAIN DAM NOS
	311	DEPRESSIVE DISORDER NEC
	31200	UNDERSOC AGGRESSIVE CONDUCT NOS
	31201	UNDERSOC AGGRESS CONDUCT MILD
	31202	UNDERSOC AGGRESSIVE CONDUCT MOD
	31203	UNDERSOC AGGRESS CONDUCT SEVERE
	31210	UNDERSOC UNAGGRESS CONDUCT NOS
	31211	UNDERSOC UNAGGRESS CONDUCT MILD
	31212	UNDERSOC UNAGGRESS CONDUCT MOD
	31213	UNDERSOC UNAGGRESS CONDUCT SEV
	31220	SOCIALIZED CONDUCT DISORDER NOS
	31221	SOCIALIZED CONDUCT DISORD MILD
	31222	SOCIALIZED CONDUCT DISORDER MOD
	31223	SOCIALIZED CONDUCT DISORDER SEV
	31230	IMPULSE CONTROL DISORDER NOS
	31231	PATHOLOGICAL GAMBLING
	31232	KLEPTOMANIA
	31233	PYROMANIA
	31234	INTERMITTENT EXPLOSIVE DISORDER
	31235	ISOLATED EXPLOSIVE DISORDER
	31239	OTH DISORD IMPULSE CONTROL NEC
	3124	MIXED DISTURB CONDUCT/EMOTIONS
	31281	CONDUCT DISORD CHILDHOOD ONSET
	31282	CONDUCT DISORD ADOLESCENT ONSET
	31289	OTHER SPEC CONDUCT DISORD NEC
	3129	UNSPECIFIED DISTURBANCE CONDUCT
	3130	CHILD/ADOL OVERANXIOUS DISORDER
	3131	CHILD/ADOL MISERY/UNHAP DISORD
	31321	SHYNESS DISORDER OF CHILDHOOD
	31322	INTROVERTED DISORDER CHILDHOOD
	31323	ELECTIVE MUTISM
	3133	CHILD/ADOL RELATIONSHIP PROBLEM
	31381	CHILD/ADOL OPPOSITIONAL DISORD
	31382	CHILD/ADOL IDENTITY DISORDER
	31389	OTH EMOTION DISTURB CHILD/ADOL
	3139	DISTURB EMOTION CHILD/ADOL NOS
	31400	ATTENTION DEFICIT NO HYPERACT
	31401	ATTENTION DEFICIT W HYPERACT
	3141	HYPERKINESIS WITH DEVEL DELAY
	3142	HYPERKINETIC CONDUCT DISORDER
	3148	OTH SPEC MAN HYPERKINETIC SYND

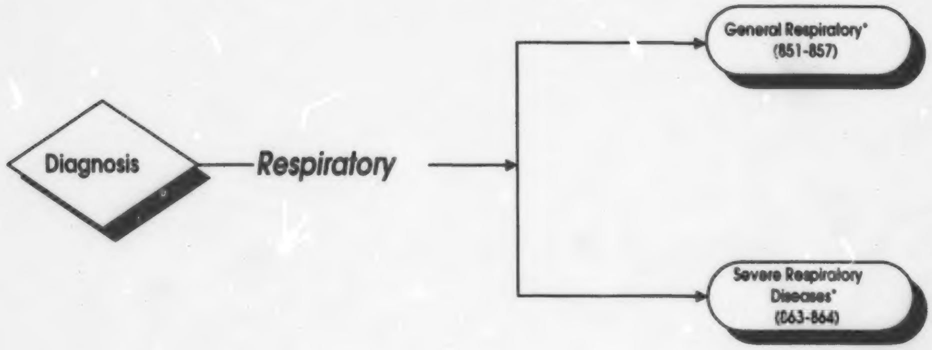
ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
801-802 DIAG INV & MANAGEMENT PSYCHIATRY		
	3149	UNSPEC HYPERKINETIC SYNDROME
	31500	READING DISORDER UNSPECIFIED
	31501	ALEXIA
	31502	DEVELOPMENTAL DYSLEXIA
	31509	OTHER SPECIFIC READING DISORDER
	3151	SPECIFIC ARITHMETICAL DISORDER
	3152	OTH SPEC LEARNING DIFFICULTIES
	31531	DEVELOPMENTAL LANGUAGE DISORDER
	31532	RECEPTIVE LANGUAGE DISORDER (MIXED)
	31539	OTH DEVEL SPEECH/LANGUAG DISORD
	3154	COORDINATION DISORDER
	3155	MIXED DEVELOPMENT DISORDER
	3158	OTH SPECIFIC DELAY DEVELOPMENT
	3159	UNSPEC DELAY IN DEVELOPMENT
	316	PSYCH FACT W DIS CLASS ELSEWHER
	317	MILD MENTAL RETARDATION
	3180	MODERATE MENTAL RETARDATION
	3181	SEVERE MENTAL RETARDATION
	3182	PROFOUND MENTAL RETARDATION
	319	UNSPECIFIED MENTAL RETARDATION
	7992	NERVOUSNESS

ACCS CELL
803 Drug & Alcohol Related Conditions

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
803 DRUG & ALCOHOL RELATED CONDITONS		
	2910	ALCOHOL WITHDRAWAL DELIRIUM
	2911	ALCOHOL AMNESTIC SYNDROME
	2912	OTHER ALCOHOLIC DEMENTIA
	2913	ALCOHOL WITHDRAWAL HALLUCINOSIS
	2914	IDIOSYNCRATIC ALCOHOL INTOX
	2915	ALCOHOLIC JEALOUSY
	29181	OTHER SPEC ALCOHOLIC PSYCHOSIS DISORD
	29189	OTHER ALCOHOL PSYCHOSIS
	2919	UNSPECIFIED ALCOHOLIC PSYCHOSIS
	2920	DRUG WITHDRAWAL SYNDROME
	29211	DRUG-INDUC ORG DELUSIONAL SYND
	29212	DRUG-INDUCED HALLUCINOSIS
	2922	PATHOLOGICAL DRUG INTOXICATION
	29281	DRUG-INDUCED DELIRIUM
	29282	DRUG-INDUCED DEMENTIA
	29283	DRUG-INDUCED AMNESTIC SYNDROME
	29284	DRUG-INDUCED ORG AFFECTIVE SYND
	29289	OTH SPEC DRUG-INDUC MENT DISORD
	2929	UNSPEC DRUG-INDUC MENTAL DISORD
	30300	ACUTE ALCOHOLIC INTOX NOS
	30301	ACUTE ALCOHOLIC INTOX CONTIN
	30302	ACUTE ALCOHOLIC INTOX EPISODIC
	30303	ACUTE ALCOHOLIC INTOX REMISSION
	30390	OTH/UNSPEC ALCOHOL DEPEND NOS
	30391	OTH/UNSPEC ALC DEPEND CONTIN
	30392	OTH/UNSPEC ALC DEPEND EPISODIC
	30393	OTH/UNSPEC ALC DEPEND REMISSION
	30400	OPIOID TYPE DEPENDENCE NOS
	30401	OPIOID TYPE DEPENDENCE CONTIN
	30402	OPIOID TYPE DEPENDENCE EPISODIC
	30403	OPIOID TYPE DEPEND REMISSION
	30410	BARBITURATE DEPENDENCE NOS
	30411	BARBITURATE DEPENDENCE CONTIN
	30412	BARBITURATE DEPENDENCE EPISODIC
	30413	BARBITURATE DEPEND REMISSION
	30420	COCAINE DEPENDENCE NOS
	30421	COCAINE DEPENDENCE CONTINUOUS
	30422	COCAINE DEPENDENCE EPISODIC
	30423	COCAINE DEPENDENCE REMISSION
	30430	CANNABIS DEPENDENCE NOS
	30431	CANNABIS DEPENDENCE CONTINUOUS
	30432	CANNABIS DEPENDENCE EPISODIC
	30433	CANNABIS DEPENDENCE REMISSION
	30440	AMPHET/PSYCHOSTIM DEPEND NOS
	30441	AMPHET/PSYCHOSTIM DEPEND CONTIN
	30442	AMPHET/PSYCHOSTIM DEPEND EPISOD
	30443	AMPHET/PSYCHOSTIM DEPEND REMIS
	30450	HALLUCINOGEN DEPENDENCE NOS
	30451	HALLUCINOGEN DEPEND CONTINUOUS
	30452	HALLUCINOGEN DEPEND EPISODIC
	30453	HALLUCINOGEN DEPEND REMISSION
	30460	OTH SPEC DRUG DEPENDENCE NOS

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
803 DRUG & ALCOHOL RELATED CONDITONS		
	30461	OTH SPEC DRUG DEPEND CONTINUOUS
	30462	OTH SPEC DRUG DEPEND EPISODIC
	30463	OTH SPEC DRUG DEPEND REMISSION
	30470	DRUG DEPEND OPIOID W OTH NOS
	30471	DRUG DEPEND OPIOID W OTH CONTIN
	30472	DRUG DEPEND OPIOID W OTH EPISOD
	30473	DRUG DEPEND OPIOID W OTH REMIS
	30480	COMBIN DEPEND EXC OPIOID NOS
	30481	COMBIN DEPEND EXC OPIOID CONTIN
	30482	COMBIN DEPEND EXC OPIOID EPISOD
	30483	COMBIN DEPEND EXC OPIOID REMIS
	30490	UNSPEC DRUG DEPENDENCE NOS
	30491	UNSPEC DRUG DEPEND CONTINUOUS
	30492	UNSPEC DRUG DEPENDENCE EPISODIC
	30493	UNSPEC DRUG DEPEND REMISSION
	30500	NONDEPENDENT ALCOHOL ABUSE NOS
	30501	NONDEPEND ALCOHOL ABUSE CONTIN
	30502	NONDEPEND ALCOHOL ABUSE EPISOD
	30503	NONDEPEND ALCOHOL ABUSE REMIS
	3051	TOBACCO USE DISORDER
	30520	NONDEPENDENT CANNABIS ABUSE NOS
	30521	NONDEPEND CANNABIS ABUSE CONTIN
	30522	NONDEPEND CANNABIS ABUSE EPISOD
	30523	NONDEPEND CANNABIS ABUSE REMIS
	30530	NONDEPEND HALLUC ABUSE NOS
	30531	NONDEPEND HALLUC ABUSE CONTIN
	30532	NONDEPEND HALLUC ABUSE EPISODIC
	30533	NONDEPEND HALLUC ABUSE REMIS
	30540	NONDEPEND BARBITURATE ABUSE NOS
	30541	NONDEPEND BARBIT ABUSE CONTIN
	30542	NONDEPEND BARBIT ABUSE EPISODIC
	30543	NONDEPEND BARBIT ABUSE REMIS
	30550	NONDEPENDENT OPIOID ABUSE NOS
	30551	NONDEPEND OPIOID ABUSE CONTIN
	30552	NONDEPEND OPIOID ABUSE EPISODIC
	30553	NONDEPEND OPIOID ABUSE REMIS
	30560	NONDEPENDENT COCAINE ABUSE NOS
	30561	NONDEPEND COCAINE ABUSE CONTIN
	30562	NONDEPEND COCAINE ABUSE EPISOD
	30563	NONDEPEND COCAINE ABUSE REMIS
	30570	NONDEPEND AMPHETAMINE ABUSE NOS
	30571	NONDEPEND AMPHET ABUSE CONTIN
	30572	NONDEPEND AMPHET ABUSE EPISODIC
	30573	NONDEPEND AMPHET ABUSE REMIS
	30580	ANTIDEPRESSANT TYPE ABUSE NOS
	30581	ANTIDEPRESSANT ABUSE CONTINUOUS
	30582	ANTIDEPRESSANT ABUSE EPISODIC
	30583	ANTIDEPRESSANT ABUSE REMISSION
	30590	ABUSE OTH/MIX/NOS DRUG NOS
	30591	ABUSE OTH/MIX/NOS DRUG CONTIN
	30592	ABUSE OTH/MIX/NOS DRUG EPISODIC
	30593	ABUSE OTH/MIX/NOS DRUG REMIS

Respiratory
Clinical Grouping


Diagnosis
Respiratory
General Respiratory*
(851-857)
Severe Respiratory
Diseases*
(863-864)

*Clinical Group broken down further - see following pages.

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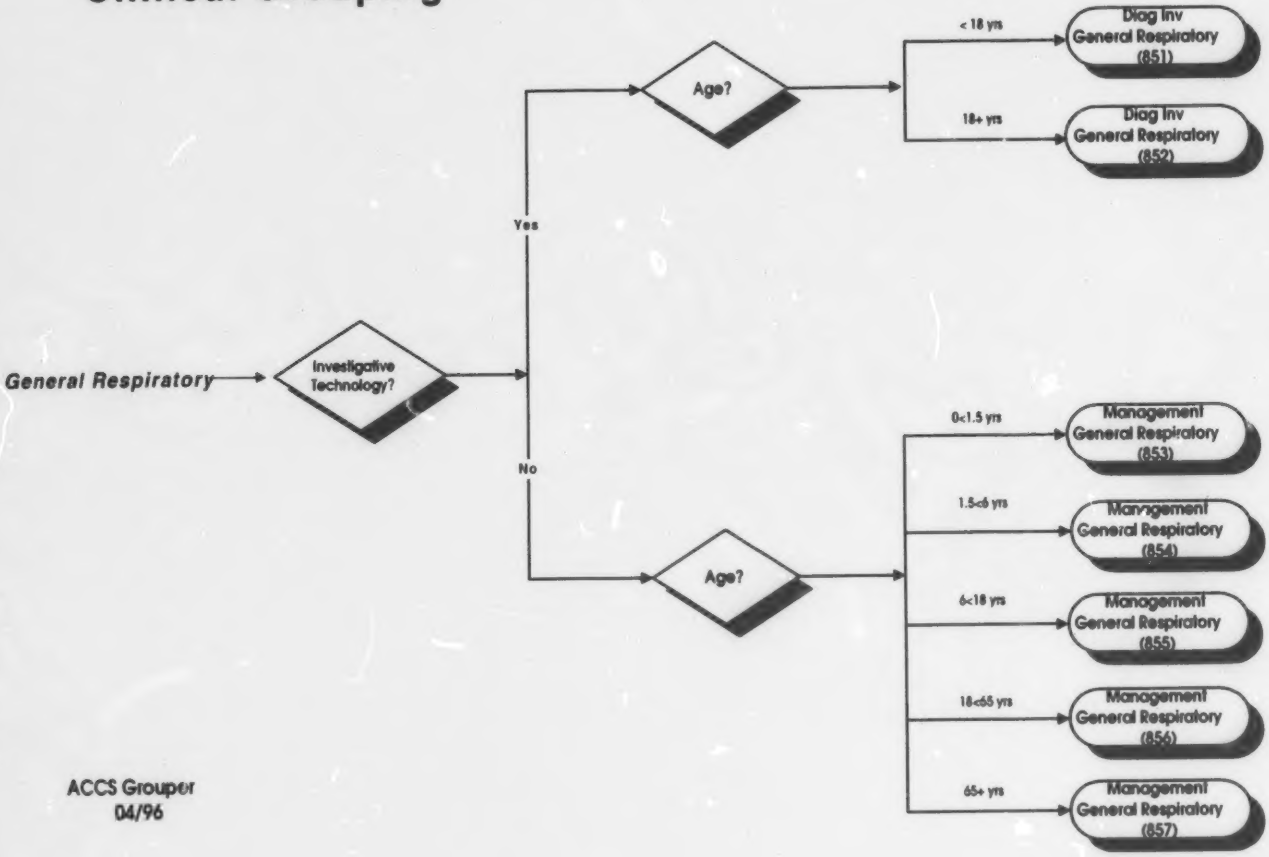
Respiratory
Clinical Grouping


General Respiratory
Investigative Technology?
Yes
No
Age?
< 18 yrs
Diag Inv General Respiratory (851)
18+ yrs
Diag Inv General Respiratory (852)
Age?
0<1.5 yrs
Management General Respiratory (853)
1.5<6 yrs
Management General Respiratory (854)
6<18 yrs
Management General Respiratory (855)
18<65 yrs
Management General Respiratory (856)
65+ yrs
Management General Respiratory (857)

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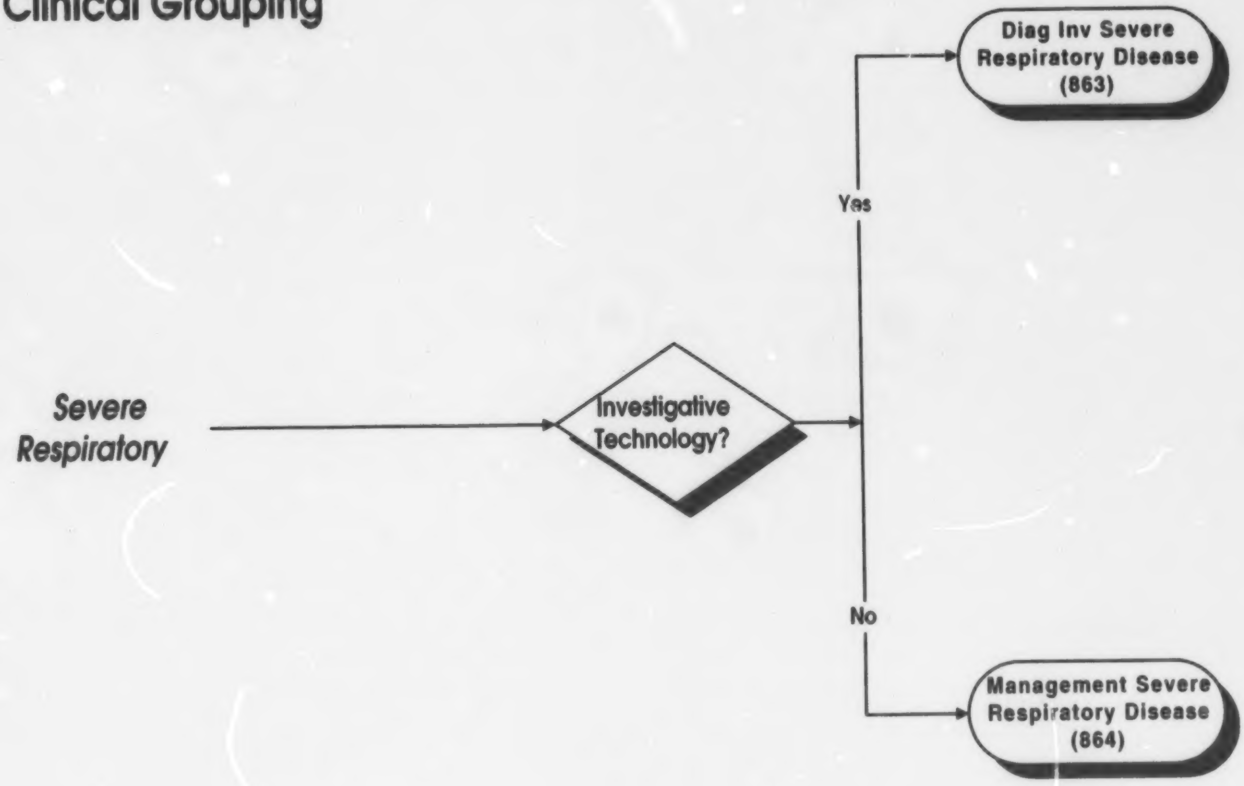
Respiratory Clinical Grouping


Severe Respiratory
Investigative Technology?
Yes
Diag Inv Severe Respiratory Disease (863)
No
Management Severe Respiratory Disease (864)

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ACCS CELL
851-857 General Respiratory

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
851-857 DIAG INV & MANAGEMENT GENERAL RESPIRATORY		
	00322	SALMONELLA PNEUMONIA
	0064	AMEBIC LUNG ABSCESS
	01000	PRIMARY TB COMPLEX-UNSPEC EXAM
	01001	PRIMARY TB COMPLEX - NO EXAM
	01002	PRIMARY TB COMPLEX-EXAM UNKNOWN
	01003	PRIMARY TB COMPLEX - MICRO DX
	01004	PRIMARY TB COMPLEX - CULTURE DX
	01005	PRIMARY TB COMPLEX-HISTOLOGY DX
	01006	PRIMARY TB COMPLEX - OTHER TEST
	01010	PRIM TB PLEURISY - UNSPEC EXAM
	01011	PRIM TB PLEURISY - NO EXAM
	01012	PRIM TB PLEURISY - EXAM UNKNOWN
	01013	PRIM TB PLEURISY - MICRO DX
	01014	PRIM TB PLEURISY - CULTURE DX
	01015	PRIM TB PLEURISY - HISTOLOGY DX
	01016	PRIM TB PLEURISY - OTHER TEST
	01080	OTH PRIM PROG TB - UNSPEC EXAM
	01081	OTH PRIM PROG TB - NO EXAM
	01082	OTH PRIM PROG TB - EXAM UNKNOWN
	01083	OTH PRIM PROG TB - MICRO DX
	01084	OTH PRIM PROG TB - CULTURE DX
	01085	OTH PRIM PROG TB - HISTOLOGY DX
	01086	OTH PRIM PROG TB - OTHER TEST
	01090	UNSPEC PRIMARY TB - UNSPEC EXAM
	01091	UNSPEC PRIMARY TB - NO EXAM
	01092	UNSPEC PRIMARY TB-EXAM UNKNOWN
	01093	UNSPEC PRIMARY TB - MICRO DX
	01094	UNSPEC PRIMARY TB - CULTURE DX
	01095	UNSPEC PRIMARY TB-HISTOLOGY DX
	01096	UNSPEC PRIMARY TB - OTHER TEST
	01100	TB LUNG INFILTRAT - UNSPEC EXAM
	01101	TB LUNG INFILTRAT - NO EXAM
	01102	TB LUNG INFILTRAT-EXAM UNKNOWN
	01103	TB LUNG INFILTRAT - MICRO DX
	01104	TB LUNG INFILTRAT - CULTURE DX
	01105	TB LUNG INFILTRAT-HISTOLOGY DX
	01106	TB LUNG INFILTRAT - OTHER TEST
	01110	TB LUNG NODULAR - UNSPEC EXAM
	01111	TB LUNG NODULAR - NO EXAM
	01112	TB LUNG NODULAR - EXAM UNKNOWN
	01113	TB LUNG NODULAR - MICRO DX
	01114	TB LUNG NODULAR - CULTURE DX
	01115	TB LUNG NODULAR - HISTOLOGY DX
	01116	TB LUNG NODULAR - OTHER TEST
	01120	TB LUNG W CAVITY - UNSPEC EXAM
	01121	TB LUNG W CAVITY - NO EXAM
	01122	TB LUNG W CAVITY - EXAM UNKNOWN
	01123	TB LUNG W CAVITY - MICRO DX
	01124	TB LUNG W CAVITY - CULTURE DX
	01125	TB LUNG W CAVITY - HISTOLOGY DX
	01126	TB LUNG W CAVITY - OTHER TEST
	01130	TB OF BRONCHUS - UNSPEC EXAM

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
851-857 DIAG INV & MANAGEMENT GENERAL RESPIRATORY		
	01131	TB OF BRONCHUS - NO EXAM
	01132	TB OF BRONCHUS - EXAM UNKNOWN
	01133	TB OF BRONCHUS - MICRO DX
	01134	TB OF BRONCHUS - CULTURE DX
	01135	TB OF BRONCHUS - HISTOLOGY DX
	01136	TB OF BRONCHUS - OTHER TEST
	01140	TB FIBROSIS LUNG - UNSPEC EXAM
	01141	TB FIBROSIS LUNG - NO EXAM
	01142	TB FIBROSIS LUNG - EXAM UNKNOWN
	01143	TB FIBROSIS LUNG - MICRO DX
	01144	TB FIBROSIS LUNG - CULTURE DX
	01145	TB FIBROSIS LUNG - HISTOLOGY DX
	01146	TB FIBROSIS LUNG - OTHER TEST
	01150	TB BRONCHIECTASIS - UNSPEC EXAM
	01151	TB BRONCHIECTASIS - NO EXAM
	01152	TB BRONCHIECTASIS-EXAM UNKNOWN
	01153	TB BRONCHIECTASIS - MICRO DX
	01154	TB BRONCHIECTASIS - CULTURE DX
	01155	TB BRONCHIECTASIS-HISTOLOGY DX
	01156	TB BRONCHIECTASIS - OTHER TEST
	01160	TB PNEUMONIA - UNSPEC EXAM
	01161	TB PNEUMONIA - NO EXAM
	01162	TB PNEUMONIA - EXAM UNKNOWN
	01163	TB PNEUMONIA - MICRO DX
	01164	TB PNEUMONIA - CULTURE DX
	01165	TB PNEUMONIA - HISTOLOGY DX
	01166	TB PNEUMONIA - OTHER TEST
	01170	TB PNEUMOTHORAX - UNSPEC EXAM
	01171	TB PNEUMOTHORAX - NO EXAM
	01172	TB PNEUMOTHORAX - EXAM UNKNOWN
	01173	TB PNEUMOTHORAX - MICRO DX
	01174	TB PNEUMOTHORAX - CULTURE DX
	01175	TB PNEUMOTHORAX - HISTOLOGY DX
	01176	TB PNEUMOTHORAX - OTHER TEST
	01180	OTH PULMONARY TB - UNSPEC EXAM
	01181	OTH PULMONARY TB - NO EXAM
	01182	OTH PULMONARY TB - EXAM UNKNOWN
	01183	OTH PULMONARY TB - MICRO DX
	01184	OTH PULMONARY TB - CULTURE DX
	01185	OTH PULMONARY TB - HISTOLOGY DX
	01186	OTH PULMONARY TB - OTHER TEST
	01190	PULMONARY TB NOS - UNSPEC EXAM
	01191	PULMONARY TB NOS - NO EXAM
	01192	PULMONARY TB NOS - EXAM UNKNOWN
	01193	PULMONARY TB NOS - MICRO DX
	01194	PULMONARY TB NOS - CULTURE DX
	01195	PULMONARY TB NOS - HISTOLOGY DX
	01196	PULMONARY TB NOS - OTHER TEST
	01200	TB PLEURISY - UNSPEC EXAM
	01201	TB PLEURISY - NO EXAM
	01202	TB PLEURISY - EXAM UNKNOWN
	01203	TB PLEURISY - MICRO DX
	01204	TB PLEURISY - CULTURE DX
	01205	TB PLEURISY - HISTOLOGY DX
	01206	TB PLEURISY - OTHER TEST
	01210	TB INTRATHOR NODES-UNSPEC EXAM

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
851-857 DIAG INV & MANAGEMENT GENERAL RESPIRATORY		
	01211	TB INTRATHOR NODES - NO EXAM
	01212	TB INTRATHOR NODES-EXAM UNKNOWN
	01213	TB INTRATHOR NODES - MICRO DX
	01214	TB INTRATHOR NODES - CULTURE DX
	01215	TB INTRATHOR NODES-HISTOLOGY DX
	01216	TB INTRATHOR NODES - OTHER TEST
	01280	OTH RESPIRATORY TB-UNSPEC EXAM
	01281	OTH RESPIRATORY TB - NO EXAM
	01282	OTH RESPIRATORY TB-EXAM UNKNOWN
	01283	OTH RESPIRATORY TB - MICRO DX
	01284	OTH RESPIRATORY TB - CULTURE DX
	01285	OTH RESPIRATORY TB-HISTOLOGY DX
	01286	OTH RESPIRATORY TB - OTHER TEST
	0203	PRIMARY PNEUMONIC PLAGUE
	0204	SECONDARY PNEUMONIC PLAGUE
	0205	PNEUMONIC PLAGUE UNSPECIFIED
	0212	PULMONARY TULAREMIA
	0221	PULMONARY ANTHRAX
	0330	BORDETELLA PERTUSSIS
	0331	BORDETELLA PARAPERTUSSIS
	0338	WHOOPING COUGH OTH SPEC ORGANSM
	0339	WHOOPING COUGH UNSPEC ORGANISM
	0391	PULMONARY ACTINOMYCOTIC INFECT
	0521	VARICELLA PNEUMONITIS
	0551	POSTMEASLES PNEUMONIA
	0730	ORNITHOSIS WITH PNEUMONIA
	0741	EPIDEMIC PLEURODYNIA
	0796	RESPIRATORY SYNCYTIAL VIRUS (RSV)
	0951	SYPHILIS OF LUNG
	1124	CANDIDIASIS OF LUNG
	1140	PRIMARY COCCIDIOIDOMYCOSIS
	1144	CHR PULMON COCCIDIOIDOMYCOSIS
	1145	UNS PULMON COCCIDIOIDOMYCOSIS
	11505	HISTOPLASMA CAPSULATUM PNEUM
	11515	HISTOPLASMA DUBOISII PNEUMONIA
	11595	UNSPEC HISTOPLASMOSIS PNEUMONIA
	1212	PARAGONIMIASIS
	1221	ECHINOCOCCUS GRANULOSUS LUNG
	1304	TOXOPLASMOSIS PNEUMONITIS
	135	SARCOIDOSIS
	1363	PNEUMOCYSTOSIS
	1370	LATE EFFECTS RESP OR UNSPEC TB
	2122	BENIGN NEOPLASM OF TRACHEA
	2123	BENIGN NEOPLASM BRONCHUS/LUNG
	2124	BENIGN NEOPLASM OF PLEURA
	2125	BENIGN NEOPLASM OF MEDIASTINUM
	2128	BEN NEO OTH SPEC RESP/INTRATHOR
	2129	BEN NEO RESP/INTRATHOR SITE NOS
	2133	BEN NEO RIBS/STERNUM/CLAVICLE
	2142	LIPOMA OF INTRATHORACIC ORGANS
	27700	CYSTIC FIBROS NO MECONIUM ILEUS
	27701	CYSTIC FIBROS W MECONIUM ILEUS
	3061	RESP MALFUNCTION MENTAL FACTORS
	41511	IATROGENIC PULM EMBOLISM & INFARCT
	41519	OTHER PULMONARY EMBOLISM & INFARCT
	4644	CROUP

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
851-857 DIAG INV & MANAGEMENT GENERAL RESPIRATORY		
	4660	ACUTE BRONCHITIS
	46611	ACUTE BRONCHIOLITIS D/T RSV
	46619	ACUTE BRONCHIOLITIS D/T OTH INFECT ORGANISM
	4800	PNEUMONIA DUE TO ADENOVIRUS
	4801	PNEUMONIA RESP SYNCYTIAL VIRUS
	4802	PNEUMONIA D/T PARAINFLUENZA VIR
	4808	PNEUMONIA D/T OTHER VIRUS NEC
	4809	VIRAL PNEUMONIA UNSPECIFIED
	481	PNEUMOCOCCAL PNEUM (STREP)
	4820	PNEUM D/T KLEBSIELLA PNEUMONIAE
	4821	PNEUMONIA D/T PSEUDOMONAS
	4822	PNEUM D/T HEMOPHILUS INFLUENZAE
	48230	PNEUMONIA D/T STREPTOCOCCUS UNS
	48231	PNEUMONIA D/T STREP GP A
	48232	PNEUMONIA D/T STREP GP B
	48239	PNEUMONIA D/T OTH STREPTOCOCCUS
	48240	PNEUMONIA D/T STAPHLOCOCCUS UN
	48241	PNEUMONIA D/T STAPH AUREUS
	48249	OTHER STAPHYLOCOCCUS PNEUMONIA
	48281	PNEUMONIAD/T ANAEROBES
	48282	PNEUMONIA D/T E COLI
	48283	PNEUMONIA D/T OTH GRAM-NEG BACT
	48284	LEGIONNAIRES' DISEASE
	48289	PNEUMONIA D/T OTH SPEC BACTERIA
	4829	BACTERIAL PNEUMONIA UNSPECIFIED
	4830	PNEUMONIA D/T MYCOPLASMA PNEUM
	4831	PNEUMONIA D/T CHLAMYDIA
	4838	PNEUMONIA D/T OTH SPEC ORGANISM
	4841	PNEUM W CYTOMEGALIC INCLUSN DIS
	4843	PNEUMONIA IN WHOOPING COUGH
	4845	PNEUMONIA IN ANTHRAX
	4846	PNEUMONIA IN ASPERGILLOSIS
	4847	PNEUMONIA OTH SYSTEMIC MYCOSES
	4848	PNEUMONIA IN OTH INFECT DIS EC
	485	BRONCHOPNEUMONIA ORGANISM NOS
	486	PNEUMONIA ORGANISM UNSPECIFIED
	4870	INFLUENZA WITH PNEUMONIA
	490	BRONCHITIS NOT SPEC ACUTE/CHR
	4910	SIMPLE CHRONIC BRONCHITIS
	4911	MUCOPURULENT CHRONIC BRONCHITIS
	49120	OB CHR BRONCH NO ACUTE EXACERB
	49121	OB CHR BRONCH W ACUTE EXACERB
	4918	OTHER CHRONIC BRONCHITIS
	4919	UNSPECIFIED CHRONIC BRONCHITIS
	4920	EMPHYSEMATOUS BLEB
	4928	OTHER EMPHYSEMA
	49300	EXTRINSIC ASTHMA NO STATUS ASTH
	49310	INTRINSIC ASTHMA NO STATUS ASTH
	49320	CHR OBSTRUCT ASTH NO STAT ASTH
	49390	ASTHMA UNSPEC NO STATUS ASTH
	494	BRONCHIECTASIS
	4950	FARMERS' LUNG
	4951	BAGASSOSIS
	4952	BIRD FANCIERS' LUNG
	4953	SUBEROSIS
	4954	MALT WORKERS' LUNG

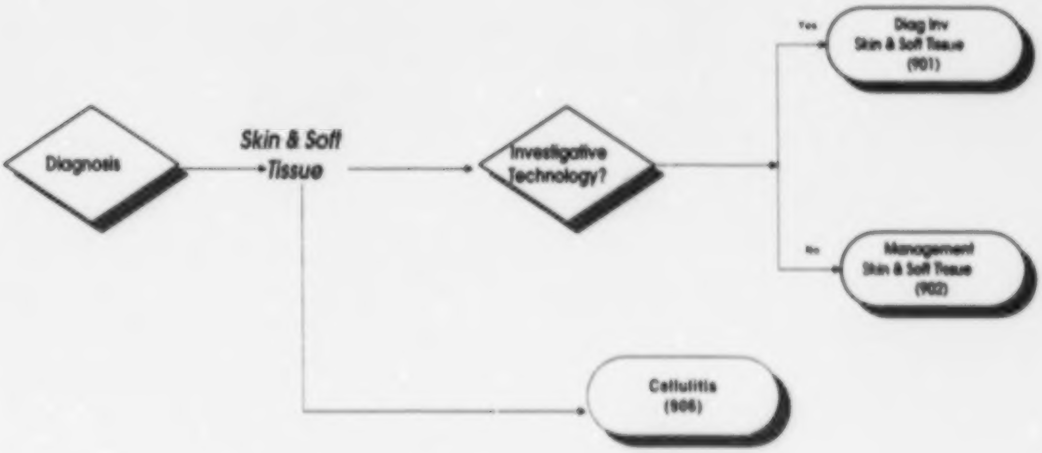
ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
851-857 DIAG INV & MANAGEMENT GENERAL RESPIRATORY		
	4955	MUSHROOM WORKERS' LUNG
	4956	MAPLE BARK-STRIPPERS' LUNG
	4957	VENTILATION PNEUMONITIS
	4958	OTH SPEC ALLERG ALVEOL/PNEUMON
	4959	ALLERGIC ALVEOL/PNEUMONITIS NOS
	496	CHRONIC AIRWAY OBSTRUCTION NEC
	500	COALWORKERS' PNEUMOCONIOSIS
	501	ASBESTOSIS
	502	PNEUMOCON OTH SILICA/SILICATES
	503	PNEUMONCONIOSIS OTH INORG DUST
	504	PNEUMONOPATHY INHAL OTHER DUST
	505	PNEUMOCONIOSIS UNSPECIFIED
	5060	BRONCH/PNEUMONITIS FUMES/VAPORS
	5061	AC PULMONARY EDEMA FUMES/VAPORS
	5062	UPPER RESP INFLAM FUMES/VAPORS
	5063	OTH AC/SUBAC RESP FUMES/VAPORS
	5064	CHRONIC RESP COND FUMES/VAPORS
	5069	UNSPEC RESP COND FUMES/VAPORS
	5070	PNEUMONITIS INHAL FOOD/VOMITUS
	5071	PNEUMONITIS INHAL OILS/ESSENCES
	5078	PNEUMONITIS OTH SOLIDS/LIQUIDS
	5080	AC PULMONARY MAN D/T RADIATION
	5081	CHR/OTH PULM MAN D/T RADIATION
	5088	RESP COND D/T OTHER EXT AGENT
	5089	RESP COND D/T UNSPEC EXT AGENT
	5110	PLEURISY NO EFFUSION/CURRENT TB
	5111	PLEURISY W BACT EFFUS NOT TB
	5118	PLEURISY W OTH EFFUSION NOT TB
	5119	UNSPECIFIED PLEURAL EFFUSION
	5120	SPONTANEOUS TENSN PNEUMOTHORAX
	5121	IATROGENIC PNEUMOTHORAX
	5128	OTHER SPONTANEOUS PNEUMOTHORAX
	5130	ABSCESS OF LUNG
	5131	ABSCESS OF MEDIASTINUM
	514	PULMONARY CONGESTION/HYPOSTASIS
	515	POSTINFLAMMATORY PULM FIBROSIS
	5160	PULMONARY ALVEOLAR PROTEINOSIS
	5161	IDIO PULMONARY HEMOSIDEROSIS
	5162	PULM ALVEOLAR MICROLITHIASIS
	5163	IDIOPATHIC FIBROSING ALVEOLITIS
	5168	OTH ALVEOLR/PARIETO PNEUMOPATHY
	5169	ALVEOLR/PARIETO PNEUMOPATHY NOS
	5171	RHEUMATIC PNEUMONIA
	5172	LUNG INVOLV SYSTEMIC SCLEROSIS
	5178	LUNG INVOLV IN OTH CONDITION EC
	5182	COMPENSATORY EMPHYSEMA
	5183	PULMONARY EOSINOPHILIA
	51883	CHRONIC RESPIRATORY FAILURE
	51889	OTHER DISEASES OF LUNG NEC
	5192	MEDIASTINITIS
	5193	OTHER DISEASES MEDIASTINUM NEC
	5194	DISORDERS OF DIAPHRAGM
	5198	OTH DIS RESPIRATORY SYSTEM NEC
	5199	UNSPEC DIS RESPIRATORY SYSTEM
	71481	RHEUMATOID LUNG
	7336	TIETZE'S DISEASE

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
851-857 DIAG INV & MANAGEMENT GENERAL RESPIRATORY		
	7484	CONGENITAL CYSTIC LUNG
	7485	AGEN/HYPOPLASIA/DYSPLASIA LUNG
	74860	ANOMALY OF LUNG UNSPECIFIED
	74861	CONGENITAL BRONCHIECTASIS
	74869	OTHER ANOMALIES OF LUNG
	7488	OTH SPEC ANOM RESPIRATORY SYS
	7489	UNSPEC ANOM RESPIRATORY SYSTEM
	75481	PECTUS EXCAVATUM
	75482	PECTUS CARINATUM
	7563	OTHER ANOMALIES RIBS/STERNUM
	7566	ANOMALIES OF DIAPHRAGM
	78600	RESPIRATORY ABNORMALITY UNSPEC
	78601	HYPERVENTILATION
	78603	APNEA
	78604	CHEYNE-STOKES RESPIRATION
	78605	SHORTNESS OF BREATH
	78606	TACHYPNEA
	78607	WHEEZING
	78609	OTH DYSPNEA/RESPIRATORY ABNORM
	7861	STRIDOR
	7863	HEMOPTYSIS
	7864	ABNORMAL SPUTUM
	78652	PAINFUL RESPIRATION
	78659	OTHER CHEST PAIN
	7867	ABNORMAL CHEST SOUNDS
	99684	COMPLICATION TRANSPLANTED LUNG
	9973	RESPIRATORY COMPLICATIONS
	99881	EMPHYSEMA (SUBCU) RESULT PROC
	9991	AIR EMBOLISM
	V426	LUNG REPLACED BY TRANSPLANT
	V460	DEPENDENCE ON ASPIRATOR
	V461	DEPENDENCE ON RESPIRATOR
	V712	OBSERV SUSPECTED TUBERCULOSIS

ACCS CELL
863-864 Severe Respiratory Disease

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
863-864 DIAG INV & MANAGEMENT SEVERE RESPIRATORY DISEASE		
	46430	ACUTE EPIGLOTTITIS NO OBSTRUCT
	46431	ACUTE EPIGLOTTITIS W OBSTRUCT
	49301	EXTRINSIC ASTHMA W STATUS ASTH
	49311	INTRINSIC ASTHMA W STATUS ASTH
	49321	CHR OBSTRUCT ASTH W STATUS ASTH
	49391	ASTHMA UNSPEC WITH STATUS ASTH
	5100	EMPYEMA WITH FISTULA
	5109	EMPYEMA WITHOUT FISTULA
	5180	PULMONARY COLLAPSE
	5181	INTERSTITIAL EMPHYSEMA
	5184	ACUTE EDEMA OF LUNG UNSPECIFIED
	5185	PULM INSUFF FOLL TRAUMA/SURGERY
	5186	ALLERGIC BRONCHOPULMONARY ASPERGILLOSIS
	51881	RESPIRATORY FAILURE
	51882	OTH PULMONARY INSUFFICIENCY NEC
	51884	AC AND CHR RESPIRATORY FAILURE
	5190	TRACHEOSTOMY COMPLICATION
	51900	TRACHEDSTOMY COMPLICATION UNS
	51901	INFECTION OF TRACHEOSTOMY
	51902	MECH COMPL OF TRACHEOSTOMY
	51909	OTH TRACHEOSTOMY COMPLICATION
	7990	ASPHYXIA
	7991	RESPIRATORY ARREST

Skin & Soft Tissue
Clinical Grouping


Diagnosis
Skin & Soft Tissue
Investigative Technology?
Yes
Diag Inv Skin & Soft Tissue (901)
No
Management Skin & Soft Tissue (902)
Cellulitis (906)

ACCS Grouper
04/00

ACCS CELL
901-905 Skin & Soft Tissue

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
901-902 DIAG INV & MANAGEMENT SKIN & SOFT TISSUE		
	0066	AMEBIC SKIN ULCERATION
	01700	TB SKIN/SUBCU - UNSPEC EXAM
	01701	TB SKIN/SUBCU - NO EXAM
	01702	TB SKIN/SUBCU - EXAM UNKNOWN
	01703	TB SKIN/SUBCU - MICRO DX
	01704	TB SKIN/SUBCU - CULTURE DX
	01705	TB SKIN/SUBCU - HISTOLOGY DX
	01706	TB SKIN/SUBCU - OTHER TEST
	01710	ERYTH NODOSUM TB - UNSPEC EXAM
	01711	ERYTH NODOSUM TB - NO EXAM
	01712	ERYTH NODOSUM TB - EXAM UNKNOWN
	01713	ERYTH NODOSUM TB - MICRO DX
	01714	ERYTH NODOSUM TB - CULTURE DX
	01715	ERYTH NODOSUM TB - HISTOLOGY DX
	01716	ERYTH NODOSUM TB - OTHER TEST
	0220	CUTANEOUS ANTHRAX
	0311	CUTANEOUS DIS D/T MYCOBACTERIA
	03285	CUTANEOUS DIPHTHERIA
	035	ERYSIPELAS
	0390	CUTANEOUS ACTINOMYCOTIC INFECT
	0393	CERVICOFAC ACTINOMYCOTIC INFECT
	0394	MADURA FOOT
	0512	CONTAGIOUS PUSTULAR DERMATITIS
	0539	HERPES ZOSTER NO COMPLICATION
	0540	ECZEMA HERPETICUM
	0546	HERPETIC WHITLOW
	0549	HERPES SIMPLEX NO COMPLICATION
	0780	MOLLUSCUM CONTAGIOSUM
	0851	CUTANEOUS LEISHMANIASIS URBAN
	0852	CUT LEISHMANIASIS ASIAN DESERT
	0853	CUT LEISHMANIASIS ETHIOPIAN
	0854	CUT LEISHMANIASIS AMERICAN
	0855	MUCOCUTANEOUS LEISHMANIASIS
	0913	SECOND SYPH SKIN MUC MEMBRANES
	09182	SYPHILITIC ALOPECIA
	1020	YAWS INITIAL LESIONS
	1021	MULT PAPILLOMATA/WET CRAB YAWS
	1022	YAWS OTHER EARLY SKIN LESIONS
	1023	YAWS HYPERKERATOSIS
	1024	YAWS GUMMATA AND ULCERS
	1030	PINTA PRIMARY LESIONS
	1031	PINTA INTERMEDIATE LESIONS
	1033	PINTA MIXED LESIONS
	1100	DERMATOPHYTOSIS SCALP AND BEARD
	1101	DERMATOPHYTOSIS OF NAIL
	1102	DERMATOPHYTOSIS OF HAND
	1103	DERMATOPHYTOSIS GROIN/PERIANAL
	1104	DERMATOPHYTOSIS OF FOOT
	1105	DERMATOPHYTOSIS OF THE BODY
	1106	DEEP SEATED DERMATOPHYTOSIS
	1108	DERMATOPHYTOSIS OF OTHER SITES
	1109	DERMATOPHYTOSIS OF UNSPEC SITE

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
901-902 DIAG INV & MANAGEMENT SKIN & SOFT TISSUE		
	1110	PITYRIASIS VERSICOLOR
	1111	TINEA NIGRA
	1112	TINEA BLANCA
	1113	BLACK PIEDRA
	1118	OTHER SPECIFIED DERMATOMYCOSES
	1119	UNSPECIFIED DERMATOMYCOSIS
	1123	CANDIDIASIS OF SKIN AND NAILS
	1141	PRIM EXTRAPULM COCCIDIOIDOMYCOS
	1203	CUTANEOUS SCHISTOSOMIASIS
	1320	PEDICULUS CAPITIS (HEAD LOUSE)
	1321	PEDICULUS CORPORIS (BODY LOUSE)
	1322	PHTHIRUS PUBIS (PUBIC LOUSE)
	1323	MIXED INFEST PEDICULUS/PHTHIRUS
	1329	PEDICULOSIS UNSPECIFIED
	1330	SCABIES
	1338	OTHER ACARIASIS
	1339	UNSPECIFIED ACARIASIS
	1340	MYIASIS
	1341	OTHER ARTHROPOD INFESTATION
	1342	HIRUDINIASIS
	1348	OTHER SPECIFIED INFESTATION
	1349	UNSPECIFIED INFESTATION
	2140	LIPOMA SKIN/SUBCU TISSUE FACE
	2141	LIPOMA OTHER SKIN/SUBCU TISSUE
	2148	LIPOMA OF OTHER SPECIFIED SITES
	2149	LIPOMA OF UNSPECIFIED SITE
	2150	BEN NEO SFT TISS HEAD/FACE/NECK
	2152	BEN NEO SOFT TISS ARM/SHOULDER
	2153	BEN NEO SOFT TISS LOW LIMB/HIP
	2154	BEN NEOPLASM SOFT TISSUE THORAX
	2155	BEN NEOPLASM SOFT TISS ABDOMEN
	2156	BEN NEOPLASM SOFT TISSUE PELVIS
	2157	BEN NEO SOFT TISS TRUNK UNSPEC
	2158	BEN NEO OTH CONNECT/SOFT TISSUE
	2159	BEN NEO CONNECT/SOFT TISS NOS
	2160	BENIGN NEOPLASM SKIN OF LIP
	2162	BEN NEOPLASM EAR/EXT AUR CANAL
	2163	BEN NEO SKIN OTH/UNSPEC FACE
	2164	BEN NEOPLASM SCALP/SKIN OF NECK
	2165	BEN NEO SKIN TRUNK EXC SCROTUM
	2166	BEN NEO SKIN UPP LIMB/SHOULDER
	2167	BEN NEO SKIN OF LOWER LIMB/HIP
	2168	BEN NEOPLASM OTH SPEC SITE SKIN
	2169	BENIGN NEOPLASM SKIN SITE NOS
	217	BENIGN NEOPLASM OF BREAST
	22801	HEMANGIOMA SKIN/SUBCU TISSUE
	2298	BENIGN NEOPLASM OTH SPEC SITES
	2299	BENIGN NEOPLASM SITE UNSPEC
	3063	SKIN MALFUNCTION MENTAL FACTORS
	37451	XANTHELASMA
	4481	NEVUS NON-NEOPLASTIC
	4570	POSTMASTECTOMY LYMPHEDEMA SYND
	4571	OTHER LYMPHEDEMA
	4572	LYMPHANGITIS
	6100	SOLITARY CYST OF BREAST
	6101	DIFFUSE CYSTIC MASTOPATHY

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
901-902 DIAG INV & MANAGEMENT SKIN & SOFT TISSUE		
	6102	FIBROADENOSIS OF BREAST
	6103	FIBROSCLEROSIS OF BREAST
	6104	MAMMARY DUCT ECTASIA
	6108	OTH SPEC BEN MAMMARY DYSPLASIAS
	6109	BENIGN MAMMARY DYSPLASIA UNSPEC
	6110	IMFLAMMATORY DISEASE OF BREAST
	6111	HYPERTROPHY OF BREAST
	6112	FISSURE OF NIPPLE
	6113	FAT NECROSIS OF BREAST
	6114	ATROPHY OF BREAST
	6115	GALACTOCELE
	6116	GALACTORRHEA NOT W CHILDBIRTH
	61171	MASTODYNIA
	61172	LUMP OR MASS IN BREAST
	61179	OTH SIGNS AND SYMPTOMS BREAST
	6118	OTHER SPEC DISORDERS OF BREAST
	6119	UNSPECIFIED DISORDER OF BREAST
	6176	ENDOMETRIOSIS IN SCAR OR SKIN
	6800	CARBUNCLE AND FURUNCLE OF FACE
	6801	CARBUNCLE AND FURUNCLE OF NECK
	6802	CARBUNCLE AND FURUNCLE OF TRUNK
	6803	CARBUNCLE/FURUNCLE UPP/FOREARM
	6804	CARBUNCLE AND FURUNCLE OF HAND
	6805	CARBUNCLE AND FURUNCLE BUTTOCK
	6806	CARBUNCLE/FURUNCLE LEG EXC FOOT
	6807	CARBUNCLE AND FURUNCLE OF FOOT
	6808	CARBUNCLE/FURUNCL OTH SPEC SITE
	6809	CARBUNCLE/FURUNCLE UNSPEC SITE
	683	ACUTE LYMPHADENITIS
	684	IMPETIGO
	6850	PILONIDAL CYST WITH ABSCESS
	6851	PILONIDAL CYST WITHOUT ABSCESS
	68600	PYODERMA UNPSECIFIED
	68601	PYODERMA GANGRENOSUM
	68609	OTHER PYODERMA
	6861	PYOGENIC GRANULOMA
	6868	OTH SPEC LOC INFECT SKIN/SUBCU
	6869	UNSPEC LOCAL INFECT SKIN/SUBCU
	69010	SEBORRHEIC DEMATITIS UNSPECIFIED
	69011	SEBORRHEA CAPITIS
	69012	SEBORRHEA INFANTILE DERMATITIS
	69018	OTHER SEBORRHEIC DERMATITIS
	6908	OTH ERYTHEMATOSQUAMOUS DERMATOS
	6910	DIAPER OR NAPKIN RASH
	6918	OTH ATOPIC DERMATITIS/REL COND
	6920	CONTACT DERMATIT/ECZ DETERGENTS
	6921	CONTACT DERMATIT/ECZ OIL/GREASE
	6922	CONTACT DERMATIT/ECZ SOLVENTS
	6923	CONTACT DERMATIT/ECZ DRUG/MEDIC
	6924	CONTACT DERMATIT/ECZ OTHER CHEM
	6925	CONTACT DERMATIT/ECZ D/T FOOD
	6926	CONTACT DERMATIT/ECZ D/T PLANTS
	69270	UNSPECIFIED DERMATITIS D/T SUN
	69271	SUNBURN
	69272	AC DERMATIT D/T SOLAR RADIATION
	69273	ACTINIC RETIC/ACTINIC GRANULOMA

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
901-902 DIAG INV & MANAGEMENT SKIN & SOFT TISSUE		
	69274	CHR DERMATITIS D/T SOLAR RADIAT
	69279	OTHER DERMATIT D/T SOLAR RADIAT
	69281	DERMATITIS DUE TO COSMETICS
	69282	DERMATITIS D/T OTHER RADIATION
	69283	DERMATITIS DUE TO METALS
	69289	CONTACT DERMATIT/ECZ OTH AGENTS
	6929	CONTACT DERMATIT/ECZ CAUSE NOS
	6930	DERMATITIS D/T DRUG/MEDICAMENT
	6931	DERMATITIS DUE TO FOOD
	6938	DERMATITIS D/T OTH SPEC SUBST
	6939	DERMATITIS D/T UNSPEC SUBSTANCE
	6940	DERMATITIS HERPETIFORMIS
	6942	JUVENILE DERMATIT HERPETIFORMIS
	6943	IMPETIGO HERPETIFORMIS
	6944	PEMPHIGUS
	6945	PEMPHIGOID
	69460	BEN MUC MEMB PEMPHIGOID NO OCUL
	6948	OTHER SPEC BULLOUS DERMATOSES
	6949	UNSPECIFIED BULLOUS DERMATOSES
	6950	TOXIC ERYTHEMA
	6951	ERYTHEMA MULTIFORME
	6952	ERYTHEMA NODOSUM
	6953	ROSACEA
	6954	LUPUS ERYTHEMATOSUS
	69581	RITTER'S DISEASE
	69589	OTH SPEC ERYTHEMATOUS CONDITION
	6959	UNSPEC ERYTHEMATOUS CONDITION
	6961	OTHER PSORIASIS
	6962	PARAPSORIASIS
	6963	PITYRIASIS ROSEA
	6964	PITYRIASIS RUBRA PILARIS
	6965	OTHER/UNSPECIFIED PITYRIASIS
	6968	OTHER PSORIASIS/SIMILAR DISORD
	6970	LICHEN PLANUS
	6971	LICHEN NITIDUS
	6978	OTHER LICHEN NEC
	6979	UNSPECIFIED LICHEN
	6980	PRURITIS ANI
	6981	PRURITIS OF GENITAL ORGANS
	6982	PRURIGO
	6983	LICHENIFICAT/LICHEN SIMPLEX CHR
	6984	DERMATITIS FACTITIA (ARTEFACTA)
	6988	OTHER SPEC PRURITIC CONDITIONS
	6989	UNSPEC PRURITIC DISORDER
	700	CORNS AND CALLOSITIES
	7010	CIRCUMSCRIBED SCLERODERMA
	7011	KERATODERMA ACQUIRED
	7012	ACQUIRED ACANTHOSIS NIGRICANS
	7013	STRIAE ATROPHICAE
	7014	KELOID SCAR
	7015	OTH ABNORMAL GRANULATION TISSUE
	7018	OTH HYPERTROPH/ATROPH COND SKIN
	7019	HYPERTROPH/ATROPH COND SKIN NOS
	7020	ACTINIC KERATOSIS
	70211	INFLAMED SEBORRHEIC KERATOSIS
	70219	OTHER SEBORRHEIC KERATOSIS

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
901-902 DIAG INV & MANAGEMENT SKIN & SOFT TISSUE		
	7028	OTHER SPECIFIED DERMATOSES
	7030	INGROWING NAIL
	7038	OTHER SPEC DISEASES OF NAIL
	7039	UNSPECIFIED DISEASE OF NAIL
	70400	ALOPECIA UNSPECIFIED
	70401	ALOPECIA AREATA
	70402	TELOGEN EFFLUVIUM
	70409	OTHER ALOPECIA
	7041	HIRSUTISM
	7042	ABNORMALITIES OF THE HAIR
	7043	VARIATIONS IN HAIR COLOR
	7048	OTH SPEC DISEASE HAIR/FOLLICLES
	7049	UNSPEC DISEASE HAIR/FOLLICLES
	7050	ANHIDROSIS
	7051	PRICKLY HEAT
	70581	DYSHIDROSIS
	70582	FOX-FORDYCE DISEASE
	70583	HIDRADENITIS
	70589	OTH SPEC DISORDERS SWEAT GLANDS
	7059	UNSPEC DISORDER OF SWEAT GLANDS
	7060	ACNE VARIOLIFORMIS
	7061	OTHER ACNE
	7062	SEBACEOUS CYST
	7063	SEBORRHEA
	7068	OTH SPEC DIS SEBACEOUS GLANDS
	7069	UNSPEC DISEASE SEBACEOUS GLANDS
	7070	DECUBITUS ULCER
	7071	ULCER LOWER LIMBS EXC DECUBITUS
	7078	CHR ULCER OTHER SPECIFIED SITES
	7079	CHRONIC ULCER UNSPECIFIED SITE
	7080	ALLERGIC URTICARIA
	7081	IDIOPATHIC URTICARIA
	7082	URTICARIA DUE TO COLD AND HEAT
	7083	DERMATOGRAPHIC URTICARIA
	7084	VIBRATORY URTICARIA
	7085	CHOLINERGIC URTICARIA
	7088	OTHER SPECIFIED URTICARIA
	7089	UNSPECIFIED URTICARIA
	70900	DYSCHROMIA UNSPECIFIED
	70901	VITIGLIO
	70909	OTHER DYSCHROMIA
	7091	VASCULAR DISORDERS OF SKIN
	7092	SCAR CONDITIONS/FIBROSIS SKIN
	7093	DEGENERATIVE SKIN DISORDERS
	7094	FB GRANULOMA SKIN/SUBCUTANEOUS
	7098	OTHER SPECIFIED DISORDERS SKIN
	7099	UNSPEC DISORDER OF SKIN/SUBCU
	7236	PANNICULITIS SPEC AFFECT NECK
	72930	PANNICULITIS UNSPECIFIED SITE
	72931	HYPERTROPHY OF FAT PAD KNEE
	72939	PANNICULITIS OTHER SITE
	7296	RESIDUAL FOREIGN BODY SOFT TISS
	7445	WEBBING OF NECK
	7449	UNSPECIFIED ANOMALIES FACE/NECK
	7570	HEREDITARY EDEMA OF LEGS
	7571	ICHTHYOSIS CONGENITA

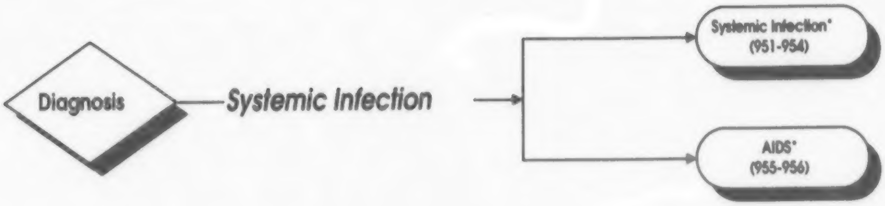
ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
901-902 DIAG INV & MANAGEMENT SKIN & SOFT TISSUE		
	7572	DERMATOGLYPHIC ANOMALIES
	75731	CONGENITAL ECTODERMAL DYSPLASIA
	75732	VASCULAR HAMARTOMAS
	75733	CONGEN PIGMENTARY ANOM OF SKIN
	75739	OTHER SPECIFIED ANOMALIES SKIN
	7574	SPECIFIED ANOMALIES OF HAIR
	7575	SPECIFIED ANOMALIES OF NAILS
	7576	SPECIFIED ANOMALIES OF BREAST
	7578	OTHER SPEC ANOMALIES INTEGUMENT
	7579	UNSPEC ANOMALIES OF INTEGUMENT
	7596	OTHER HAMARTOSES NEC
	7808	HYPERHIDROSIS
	7820	DISTURBANCE OF SKIN SENSATION
	7821	RASH/OTH NONSPEC SKIN ERUPTION
	7822	LOCAL SUPERFIC SWELL/MASS/LUMP
	7827	SPONTANEOUS ECCHYMOSES
	7828	CHANGES IN SKIN TEXTURE
	7829	OTH SYMPT SKIN/INTEGUMENT TISS
	7854	GANGRENE
	7856	ENLARGEMENT OF LYMPH NODES
	7938	NONSPEC ABNORM FINDINGS BREAST
	9100	ABRASN NO INFECT FAC/NECK/SCALP
	9101	ABRASN W INFECT FACE/NECK/SCALP
	9102	BLISTR NO INFECT FAC/NECK/SCALP
	9103	BLISTER W INFECT FAC/NECK/SCALP
	9104	INSECT BITE NO INFECT FACE/NECK
	9105	INSECT BITE W INFECT FACE/NECK
	9106	SUPRFIC FB NO INFECT FACE/NECK
	9107	SUPRFIC FB W INFECT FACE/NECK
	9108	OTH/NOS SUPRFIC NO INFECT FACE
	9109	OTH/NOS SUPRFIC W INFECT FACE
	9110	ABRASION NO INFECTION TRUNK
	9111	ABRASION WITH INFECTION TRUNK
	9112	BLISTER NO INFECTION TRUNK
	9113	BLISTER WITH INFECTION TRUNK
	9114	INSECT BITE NO INFECTION TRUNK
	9115	INSECT BITE W INFECTION TRUNK
	9118	OTH/NOS SUPRFIC NO INFECT TRUNK
	9119	OTH/NOS SUPRFIC W INFECT TRUNK
	9120	ABRASN NO INFECT SHOULD/UPP ARM
	9121	ABRASN W INFECT SHOULD/UPP ARM
	9122	BLISTR NO INFECT SHOULD/UPP ARM
	9123	BLISTER W INFECT SHOULD/UPP ARM
	9124	INSECT BITE NO INFEC SHOULD/UPP
	9125	INSECT BITE W INFECT SHOULD/UPP
	9126	SUPRFIC FB NO INFECT SHOULD/UPP
	9127	SUPRFIC FB W INFECT SHOULD/UPP
	9128	OTH/NOS SUPRFC NO INF SHOULD/UP
	9129	OTH/NOS SUPRFC W INF SHOULD/UPP
	9130	ABRASION NO INFECTION LOWER ARM
	9131	ABRASION W INFECTION LOWER ARM
	9132	BLISTER NO INFECTION LOWER ARM
	9133	BLISTER W INFECTION LOWER ARM
	9134	INSECT BITE NO INFECT LOWER ARM
	9135	INSECT BITE W INFECT LOWER ARM
	9138	OTH/NOS SUPRFIC NO INF LOW ARM

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
901-902 DIAG INV & MANAGEMENT SKIN & SOFT TISSUE		
	9139	OTH/NOS SUPRFIC W INF LOWER ARM
	9140	ABRASION NO INFECTION HAND
	9141	ABRASION WITH INFECTION HAND
	9142	BLISTER NO INFECTION HAND
	9143	BLISTER WITH INFECTION HAND
	9144	INSECT BITE NO INFECTION HAND
	9145	INSECT BITE WITH INFECTION HAND
	9148	OTH/NOS SUPRFIC NO INFECT HAND
	9149	OTH/NOS SUPRFIC W INFECT HAND
	9150	ABRASION NO INFECTION FINGER
	9151	ABRASION WITH INFECTION FINGER
	9152	BLISTER NO INFECTION FINGER
	9153	BLISTER WITH INFECTION FINGER
	9154	INSECT BITE NO INFECTION FINGER
	9155	INSECT BITE W INFECTION FINGER
	9158	OTH/NOS SUPRFC NO INFECT FINGER
	9159	OTH/NOS SUPRFIC W INFECT FINGER
	9160	ABRASION NO INFECTION HIP/LEG
	9161	ABRASION WITH INFECTION HIP/LEG
	9162	BLISTER NO INFECTION HIP/LEG
	9163	BLISTER WITH INFECTION HIP/LEG
	9164	INSECT BITE NO INFECT HIP/LEG
	9165	INSECT BITE W INFECTION HIP/LEG
	9168	OTH/NOS SUPRFIC NO INF HIP/LEG
	9169	OTH/NOS SUPRFIC W INF HIP/LEG
	9170	ABRASION NO INFECTION FOOT/TOE
	9171	ABRASION W INFECTION FOOT/TOE
	9172	BLISTER NO INFECTION FOOT/TOE
	9173	BLISTER WITH INFECTION FOOT/TOE
	9174	INSECT BITE NO INFECT FOOT/TOE
	9175	INSECT BITE W INFECT FOOT/TOE
	9178	OTH/NOS SUPRFIC NO INF FOOT/TOE
	9179	OTH/NOS SUPRFIC W INF FOOT/TOE
	9190	ABRASION NO INFECTION MULT/NOS
	9191	ABRASION W INFECTION MULT/NOS
	9192	BLISTER NO INFECTION MULT/NOS
	9193	BLISTER WITH INFECTION MULT/NOS
	9194	INSECT BITE NO INFECT MULT/NOS
	9195	INSECT BITE W INFECT MULT/NOS
	9198	OTH/NOS SUPRFIC NO INF MULT/NOS
	9199	OTH/NOS SUPRFIC W INF MULT/NOS
	99654	MECH COMPL BREAST PROSTHESIS
	V423	SKIN REPLACED BY TRANSPLANT
	V500	ELECTIVE SURG HAIR TRANSPLANT
	V501	OTHER PLASTIC SURGERY COSMETIC
	V502	ROUTINE OR RITUAL CIRCUMCISION
	V5041	PROPHYLACTIC BREAST REMOVAL
	V508	OTHER ELECTIVE SURGERY
	V509	UNSPECIFIED ELECTIVE SURGERY
	V51	AFTERCARE INVOLV PLASTIC SURG
	V524	FITTING/ADJUST BREAST PROSTH
	V583	ATTENTION SURG DRESSING/SUTURES
	V5841	PLANNED POST-OP WOUND CLOSURE

ACCS CELL
906 Cellulitis

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
906 CELLULITIS		
	68100	CELLULITIS & ABSCESS, FINGER, UNSPEC
	68101	FELON, FINGER
	68102	ONYYCHIA & PARONYCHIA, FINGER
	68110	CELLULITIS & ABSCESS, TOE, UNSPEC
	68111	ONYCHIA & PARONYCHIA, TOE
	6819	CELLULTIS & ABSCESS, UNSPEC DIGIT
	6820	OTHER CELLULITIS & ABSCESS, FACE
	6821	OTHER CELLULITIS & ABSCESS, NECK
	6822	OTHER CELLULITIS & ABSCESS, TRUNK
	6823	OTHER CELL & ABSCESS, UPPER ARMS & FOREARM
	6824	OTHER CELL & ABSCESS, HAND EX FING & THUMB
	6825	OTHER CELL & ABSCESS BUTTOCK
	6826	OTHER CELL & ABSCESS LEG EXC FOOT
	6827	OTHER CELL & ABSCESS FOOT, EXC TOES
	6828	OTHER CELL & ABSCESS OTHER SPEC SITES
	6829	OTHER CELL & ABSCESS UNSPEC SITE

Systemic Infection
Clinical Grouping

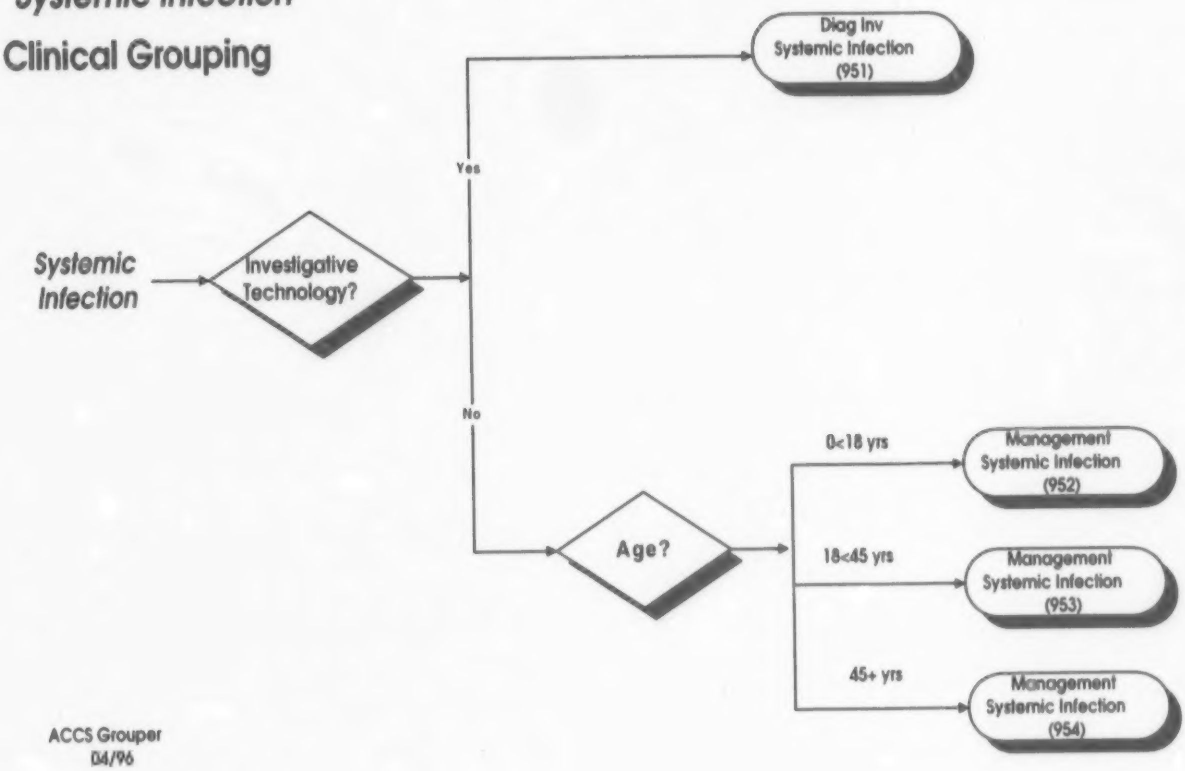

Diagnosis
Systemic Infection
Systemic Infection*
(951-954)
AIDS*
(955-956)

*Clinical Group broken down further - see following pages.

ACCS Grouper
04/00

Systemic Infection

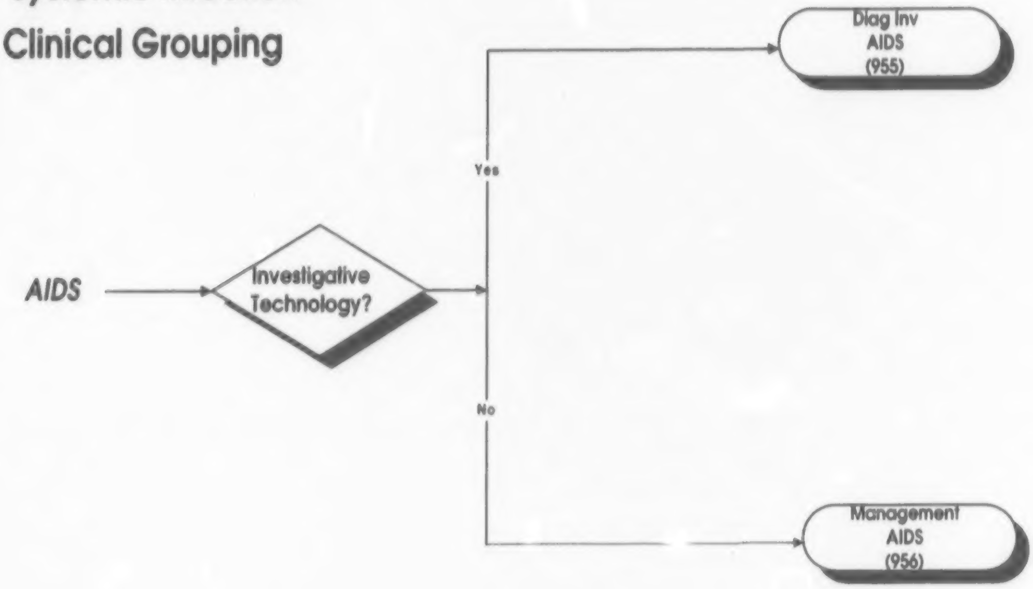
Clinical Grouping


Systemic Infection
Investigative Technology?
Yes
Diag Inv Systemic Infection (951)
No
Age?
0<18 yrs
Management Systemic Infection (952)
18<45 yrs
Management Systemic Infection (953)
45+ yrs
Management Systemic Infection (954)

ACCS Grouper
04/96

Systemic Infection

Clinical Grouping


AIDS
Investigative Technology?
Yes
No
Diag Inv AIDS (955)
Management AIDS (956)

ACCS Grouper
04/00

ACCS CELL
951-954 Systemic Infection

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
951-954 DIAG INV & MANAGEMENT SYSTEMIC INFECTION		
	0020	TYPHOID FEVER
	0021	PARATYPHOID FEVER A
	0022	PARATYPHOID FEVER B
	0023	PARATYPHOID FEVER C
	0029	PARATYPHOID FEVER UNSPECIFIED
	0031	SALMONELLA SEPTICEMIA
	0312	DISEASES DUE TO MYCOBACTERIA,DISSEMINATED
	00320	LOCAL SALMONELLA INFECT UNSPEC
	00329	OTH LOCAL SALMONELLA INFECTIONS
	0038	OTHER SPEC SALMONELLA INFECTION
	0039	UNSPEC SALMONELLA INFECTIONS
	0051	BOTULISM
	0065	AMEBIC BRAIN ABSCESS
	0068	AMEBIC INFECTION OF OTHER SITES
	0069	AMEBIASIS UNSPECIFIED
	01790	TB OTHER ORGANS - UNSPEC EXAM
	01791	TB OTHER ORGANS - NO EXAM
	01792	TB OTHER ORGANS - EXAM UNKNOWN
	01793	TB OTHER ORGANS - MICRO DX
	01794	TB OTHER ORGANS - CULTURE DX
	01795	TB OTHER ORGANS - HISTOLOGY DX
	01796	TB OTHER ORGANS - OTHER TEST
	01800	ACUTE MILIARY TB - UNSPEC EXAM
	01801	ACUTE MILIARY TB - NO EXAM
	01802	ACUTE MILIARY TB - EXAM UNKNOWN
	01803	ACUTE MILIARY TB - MICRO DX
	01804	ACUTE MILIARY TB - CULTURE DX
	01805	ACUTE MILIARY TB - HISTOLOGY DX
	01806	ACUTE MILIARY TB - OTHER TEST
	01880	OTHER MILIARY TB - UNSPEC EXAM
	01881	OTHER MILIARY TB - NO EXAM
	01882	OTHER MILIARY TB - EXAM UNKNOWN
	01883	OTHER MILIARY TB - MICRO DX
	01884	OTHER MILIARY TB - CULTURE DX
	01885	OTHER MILIARY TB - HISTOLOGY DX
	01886	OTHER MILIARY TB - OTHER TEST
	01890	UNSPEC MILIARY TB - UNSPEC EXAM
	01891	UNSPEC MILIARY TB - NO EXAM
	01892	UNSPEC MILIARY TB -EXAM UNKNOWN
	01893	UNSPEC MILIARY TB - MICRO DX
	01894	UNSPEC MILIARY TB - CULTURE DX
	01895	UNSPEC MILIARY TB -HISTOLOGY DX
	01896	UNSPEC MILIARY TB - OTHER TEST
	0200	BUBONIC PLAGUE
	0201	CELLULOCUTANEOUS PLAGUE
	0202	SEPTICEMIC PLAGUE
	0208	OTHER SPECIFIED PLAGUE
	0209	UNSPECIFIED PLAGUE
	0210	ULCEROGLANDULAR TULAREMIA
	0213	OCULOGLANDULAR TULAREMIA
	0218	OTHER SPECIFIED TULAREMIA
	0219	UNSPECIFIED TULAREMIA

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
951-954 DIAG INV & MANAGEMENT SYSTEMIC INFECTION		
	0223	ANTHRAX SEPTICEMIA
	0228	OTH SPEC ANTHRAX MANIFESTATIONS
	0229	UNSPECIFIED ANTHRAX
	0230	BRUCELLA MELITENSIS
	0231	BRUCELLA ABORTUS
	0232	BRUCELLA SUIS
	0233	BRUCELLA CANIS
	0238	OTHER BRUCELLOSIS
	0239	UNSPECIFIED BRUCELLOSIS
	024	GLANDERS
	025	MELIOIDOSIS
	0260	SPIRILLARY FEVER
	0261	STREPTOBACILLARY FEVER
	0269	UNSPECIFIED RAT-BITE FEVER
	0270	LISTERIOSIS
	0271	ERYSIPELOTHRIX INFECTION
	0272	PASTEURELLOSIS
	0278	OTH SPEC ZOONOTIC BACTERIAL DIS
	0279	UNSPEC ZOONOTIC BACTERIAL DIS
	0300	LEPTROMATOUS LEPROSY (TYPE L)
	0301	TUBERCULOID LEPROSY (TYPE T)
	0302	INDETERMINATE LEPROSY (GROUP I)
	0303	BORDERLINE LEPROSY (GROUP B)
	0308	OTHER SPECIFIED LEPROSY
	0309	UNSPECIFIED LEPROSY
	0310	PULMONARY DIS D/T MYCOBACTERIA
	0312	DISEASES D/T MYCOBACTERIA DISSEMIN
	0318	OTHER SPEC DIS D/T MYCOBACTERIA
	0319	UNSPEC DISEASE D/T MYCOBACTERIA
	03289	OTHER SPECIFIED DIPHTHERIA
	0329	UNSPECIFIED DIPHTHERIA
	0341	SCARLET FEVER
	0362	MENINGOCOCCEMIA
	0363	WATERHOUSE-FRIDERICHSEN SYND
	03689	OTHER MENINGOCOCCAL INFECTION
	0369	UNSPEC MENINGOCOCCAL INFECTION
	037	TETANUS
	0380	STREPTOCOCCAL SEPTICEMIA
	03810	STAPHYLOCOCCAL SEPTICEMIA,UNSPECIFIED
	03811	STAPHYLOCOCCAL AUREUS SEPTICEMIA
	03819	OTHER STAPHYLOCOCCAL SEPTICEMIA
	0382	PNEUMOCOCCAL SEPTICEMIA
	0383	SEPTICEMIA DUE TO ANAEROBES
	03840	SEPT D/T GRAM-NEG ORGANISM NOS
	03841	SEPT D/T HEMOPHILUS INFLUENZAE
	03842	SEPTICEMIA D/T ESCHERICHIA COLI
	03843	SEPTICEMIA D/T PSEUDOMONAS
	03844	SEPTICEMIA D/T SERRATIA
	03849	SEPT D/T OTH GRAM-NEG ORGANISM
	0388	OTHER SPECIFIED SEPTICEMIAS
	0389	UNSPECIFIED SEPTICEMIA
	0398	OTH SPEC ACTINOMYCOTIC INFECT
	0399	UNSPEC ACTINOMYCOTIC INFECT
	0400	GAS GANGRENE
	0401	RHINOSCLEROMA
	0403	NECROBACILLOSIS

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
951-954 DIAG INV & MANAGEMENT SYSTEMIC INFECTION		
	04089	OTHER SPEC BACTERIAL DISEASES
	04100	UNS STREPTOCOCCUS INFECTION
	04101	STREPTOCOCCUS GP A INFECTION
	04102	STREPTOCOCCUS GP B INFECTION
	04103	STREPTOCOCCUS GP C INFECTION
	04104	STREPTOCOCCUS GP D INFECTION
	04105	STREPTOCOCCUS GP G INFECTION
	04109	OTHER STREPTOCOCCUS INFECTION
	04110	UNS STAPHYLOCOCCUS INFECTION
	04111	STAPHYLOCOCCUS AUREUS INFECTION
	04119	OTHER STAPHYLOCOCCUS INFECTION
	0412	PNEUMOCOCCUS INFECTION
	0413	FRIEDLANDER'S BACILLUS INFECT
	0414	ESCHERICHIA COLI INFECTION
	0415	HEMOPHILUS INFLUENZAE INFECT
	0416	PROTEUS MIRAB/MORGANII INFECT
	0417	PSEUDOMONAS INFECTION
	04181	MYCOPLASMA INFECTION
	04182	BACILLUS FRAGILIS INFECTION
	04183	CLOSTRIDIUM PERFRINGENS INFECT
	04184	OTHER ANAEROBIC INFECTION
	04185	OTHER GRAM-NEGATIVE INFECTIONS
	04186	HELICOBACTER PYLORI (HPYLORI)
	04189	OTH SPEC BACTERIAL INFECTION
	0419	BACTERIAL INFECTION UNSPECIFIED
	0500	VARIOLA MAJOR SMALLPOX
	0501	ALASTRIM SMALLPOX
	0502	MODIFIED SMALLPOX
	0509	SMALLPOX UNSPECIFIED
	0510	COWPOX
	0511	PSEUDOCOWPOX
	0519	PARAVACCINIA UNSPECIFIED
	0527	VARICELLA W OTH COMPLICATIONS
	0528	VARICELLA W UNSPEC COMPLICATION
	0529	VARICELLA WITHOUT COMPLICATION
	05379	HERPES ZOSTER W OTH SPEC COMPL
	0538	HERPES ZOSTER W UNSPEC COMPL
	0545	HERPETIC SEPTICEMIA
	05479	HERPES SIMPLEX W OTH SPEC COMPL
	0548	HERPES SIMPLEX W UNSPEC COMPL
	05579	MEASLES W OTH SPEC COMPLICATION
	0558	MEASLES W UNSPEC COMPLICATION
	0559	MEASLES WITHOUT COMPLICATION
	05679	RUBELLA W OTH SPEC COMPLICATION
	0568	RUBELLA W UNSPEC COMPLICATIONS
	0569	RUBELLA WITHOUT COMPLICATIONS
	0570	ERYTHEMA INFECTIOSUM
	0578	OTHER SPEC VIRAL EXANTHEMATA
	0579	UNSPECIFIED VIRAL EXANTHEMATA
	0600	SYLVATIC YELLOW FEVER
	0601	URBAN YELLOW FEVER
	0609	UNSPECIFIED YELLOW FEVER
	061	DENGUE
	0650	CRIMEAN HEMORRHAGIC FEVER
	0651	OMSK HEMORRHAGIC FEVER
	0652	KYASANUR FOREST DISEASE

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
951-954 DIAG INV & MANAGEMENT SYSTEMIC INFECTION		
	0653	OTH TICK-BORNE HEMORRHAG FEVER
	0654	MOSQUITO-BORNE HEMORRHAG FEVER
	0658	OTH SPEC ARTHRO-BORNE HEM FEVER
	0659	UNSPEC ARTHRO-BORNE HEM FEVER
	0660	PHLEBOTOMUS FEVER
	0661	TICK-BORNE FEVER
	0663	OTHER MOSQUITO-BORNE FEVER
	0668	OTH SPEC ARTHRO-BORNE VIR DIS
	0669	UNSPEC ARTHROPOD-BORNE VIR DIS
	07279	MUMPS W OTH SPEC COMPLICATIONS
	0728	MUMPS WITH UNSPEC COMPLICATION
	0729	MUMPS WITHOUT COMPLICATION
	0737	ORNITHOSIS W OTH SPEC COMPL
	0738	ORNITHOSIS W UNSPEC COMPL
	0739	ORNITHOSIS UNSPECIFIED
	0743	HAND FOOT AND MOUTH DISEASE
	0748	OTH SPEC DIS D/T COXSACKIE VIR
	075	INFECTIOUS MONONUCLEOSIS
	0782	SWEATING FEVER
	0783	CAT-SCRATCH DISEASE
	0784	FOOT AND MOUTH DISEASE
	0785	CYTOMEGALOVIRAL DISEASE
	0787	ARENAVIRAL HEMORRHAGIC FEVER
	07889	OTHER SPEC DISEASES D/T VIRUSES
	0790	ADENOVIRUS INFECTION
	0791	ECHO VIRUS INFECTION
	0792	COXSACKIE VIRUS INFECTION
	0793	RHINOVIRUS INFECTION
	07981	HANTAVIRUS INFECTION
	07988	OTHER SPEC CHLAMYDIAL INFECTION
	07989	OTHER SPEC VIRAL INFECTION
	07998	UNSPEC CHLAMYDIAL INFECTION
	07999	UNSPECIED VIRAL INFECTION
	080	LOUSE-BORNE (EPIDEMIC) TYPHUS
	0810	MURINE (ENDEMIC) TYPHUS
	0811	BRILL'S DISEASE
	0812	SCRUB TYPHUS
	0819	UNSPECIFIED TYPHUS
	0820	SPOTTED FEVERS
	0821	BOUTONNEUSE FEVER
	0822	NORTH ASIAN TICK FEVER
	0823	QUEENSLAND TICK TYPHUS
	0828	OTHER TICK-BORNE RICKETTSIOSES
	0829	UNSPEC TICK-BORNE RICKETTSIOSES
	0830	Q-FEVER
	0831	TRENCH FEVER
	0832	RICKETTSIALPOX
	0838	OTHER SPECIFIED RICKETTSIOSES
	0839	UNSPECIFIED RICKETTSIOSES
	0840	FALCIPARUM MALARIA(MAL TERTIAN)
	0841	VIVAX MALARIA (BENIGN TERTIAN)
	0842	QUARTAN MALARIA
	0843	OVALE MALARIA
	0844	OTHER MALARIA
	0845	MIXED MALARIA
	0846	UNSPECIFIED MALARIA

F7

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
951-954 DIAG INV & MANAGEMENT SYSTEMIC INFECTION		
	0847	INDUCED MALARIA
	0848	BLACKWATER FEVER
	0849	OTH PERNICIOUS COMPL OF MALARIA
	0850	VISC LEISHMANIASIS (KALA-AZUR)
	0859	UNSPECIFIED LEISHMANIASIS
	0861	CHAGAS'S DIS W OTH ORGAN INVOLV
	0862	CHAGAS'S DIS NO ORGAN INVOLV
	0863	GAMBIAN TRYPANOSOMIASIS
	0864	RHODESIAN TRYPANOSOMIASIS
	0865	AFRICAN TRYPANOSOMIASIS UNSPEC
	0869	UNSPECIFIED TRYPANOSOMIASIS
	0870	LOUSE-BORNE RELAPSING FEVER
	0871	TICK-BORNE RELAPSING FEVER
	0879	UNSPECIFIED RELAPSING FEVER
	0880	BARTONELLOSIS
	08881	LYME DISEASE
	08882	BABESIOSIS
	08889	OTH SPEC ARTHROPOD-BORNE DIS
	0889	UNSPEC ARTHROPOD-BORNE DISEASES
	0900	EARLY CONGEN SYPH SYMPTOMATIC
	1000	LEPTOSPIROSIS ICTEROHEMORRHAGIC
	1009	UNSPECIFIED LEPTOSPIROSIS
	1027	YAWS OTHER MANIFESTATIONS
	1028	LATENT YAWS
	1029	YAWS UNSPECIFIED
	1125	DISSEMINATED CANDIDIASIS
	11289	CANDIDIASIS OTHER SPEC SITES
	1129	CANDIDIASIS OF UNSPEC SITE
	1143	OTH FORMS PROG COCCIDIOIDOMYCOS
	1149	COCCIDIOIDOMYCOSIS UNSPECIFIED
	11500	HISTOPLASMA CAPSULATUM NO MAN
	11509	HISTOPLASMA CAPSULATUM OTH MAN
	11510	HISTOPLASMA DUBOISII NO MAN
	11519	HISTOPLASMA DUBOISII OTH MANIF
	11590	UNSPEC HISTOPLASMOSIS NO MAN
	11599	UNSPEC HISTOPLASMOSIS OTH MANIF
	1160	BLASTOMYCOSIS
	1161	PARACOCCIDIOIDOMYCOSIS
	1162	LOBOMYCOSIS
	1170	RHINOSPORIDIOSIS
	1171	SPOROTRICHOSIS
	1172	CHROMOBLASTOMYCOSIS
	1173	ASPERGILLOSIS
	1174	MYCOTIC MYCETOMAS
	1175	CRYPTOCOCCOSIS
	1176	ALLESCHERIOSIS (PETRIELLIDOSIS)
	1177	ZYGOMYCOSIS(PHYCO/MUCORMYCOSIS)
	1178	INFECTION DEMATIACIOUS FUNGI
	1179	OTHER AND UNSPECIFIED MYCOSES
	118	OPPORTUNISTIC MYCOSES
	1202	SCHISTOSOMA JAPONICUM
	1208	OTHER SPEC SCHISTOSOMIASIS
	1209	UNSPECIFIED SCHISTOSOMIASIS
	1215	METAGONIMIASIS
	1216	HETEROPHYIASIS
	1218	OTHER SPEC TREMATODE INFECTIONS

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
951-954 DIAG INV & MANAGEMENT SYSTEMIC INFECTION		
	1219	UNSPEC TREMATODE INFECTION
	1223	ECHINOCOCCUS GRANULOSUS OTHER
	1224	ECHINOCOCCUS GRANULOSUS UNSPEC
	1226	ECHINOCOC MULTILOCULARIS OTHER
	1227	ECHINOCOC MULTILOCULARIS UNSPEC
	1229	ECHINOCOCCOSIS OTH AND UNSPEC
	124	TRICHINOSIS
	1250	BANCROFTIAN FILARIASIS
	1251	MALAYAN FILARIASIS
	1252	LOIASIS
	1253	ONCHOCERCIASIS
	1254	DIPETALONEMIASIS
	1255	MANSONELLA OZZARDI INFECTION
	1256	OTHER SPECIFIED FILARIASIS
	1257	DRACONTIASIS
	1259	UNSPECIFIED FILARIASIS
	1278	MIXED INTESTINAL HELMINTHIASIS
	1280	TOXOCARIASIS
	1281	GNATHOSTOMIASIS
	1288	OTHER SPECIFIED HELMINTHIASIS
	1289	UNSPECIFIED HELMINTHIASIS
	1307	TOXOPLASMOSIS OTHER SPEC SITES
	1308	MULTISYST DISSEM TOXOPLASMOSIS
	1309	TOXOPLASMOSIS UNSPECIFIED
	1360	AINHUM
	1362	SPEC INFECT FREE-LIVING AMEBAE
	1364	PSOROSPERMIASIS
	1365	SARCOSPORIDIOSIS
	1368	OTHER INFECTIOUS/PARASITIC DIS
	1369	UNSPEC INFECTIOUS/PARASITIC DIS
	1374	LATE EFFECTS TB OTH SPEC ORGANS
	1398	LATE EFFECTS OTH/UNSPEC INFECT
	7806	PYREXIA OF UNKNOWN ORIGIN
	7907	BACTEREMIA
	7908	VIREMIA UNSPECIFIED
	7953	NONSPEC POSITIVE CULTURE FIND
	9990	GENERALIZED VACCINIA
	9993	OTHER INFECTION
	V090	DRUG-RESIST INFECT/PENICILLIN
	V091	DRUG-RESIS INFECT/CEPHALOSPORIN
	V092	DRUG-RESIS INFECT/MACROLIDES
	V093	DRUG-RESIST INFECT/TETRACYCLINE
	V094	DRUG-RESIST INF/AMINOGLYCOSIDES
	V0950	DRUG-RES/QUINOLONES NO MULT RES
	V0951	DRUG-RES/QUINOLONES W MULT RES
	V096	DRUG-RESIS INFECT/SULFONAMIDES
	V0970	DRUG-RES/ANTIMICROBIAL NO MULT
	V0971	DRUG-RES/ANTIMICROBIAL W MULT
	V0980	OTH DRUG-RESIST INF NO MULT RES
	V0981	OTH DRUG-RESIST INF W MULT RES
	V0990	UNS DRUG-RESIST INF NO MULT RES
	V0991	UNS DRUG-RESIST INF W MULT RES

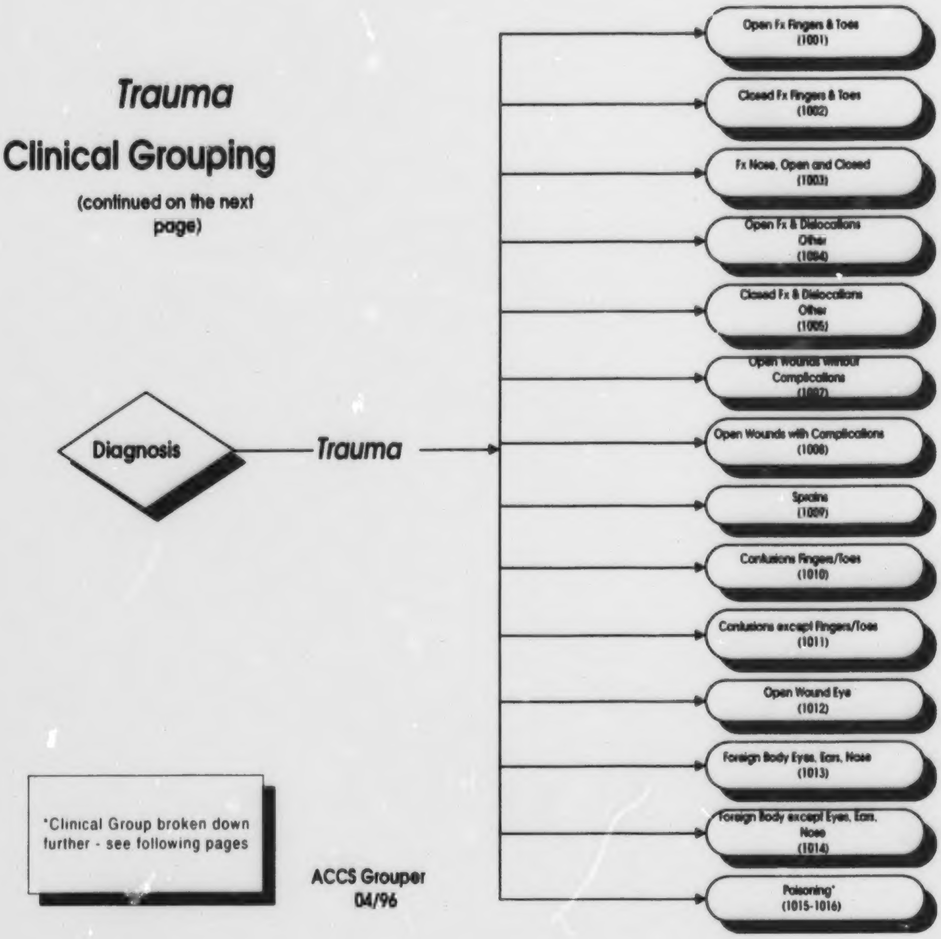
ACCS CELL
955-957 AIDS

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
955-956 DIAG INV & MANAGEMENT AIDS		
	042	HIV DISEASE
	0420	HIV INFECT W SPECIFIED INFECT
	0421	HIV INFECT CAUS OTH SPEC INFECT
	0422	HIV INFECT W SPEC MALIGNANT NEO
	0429	AIDS UNSPECIFIED
	0430	HIV INFECT CAUS LYMPHADENOPATHY
	0431	HIV INFECT CAUSING SPEC DIS CNS
	0432	HIV INFECT CAUS OTH IMMUNE DIS
	0433	HIV INFECT CAUS OTH SPEC COND
	0439	AIDS REL COMPLEX UNSPECIFIED
	0440	HIV INFECT CAUS SPEC AC INFECT
	0449	HIV INFECTION NOS
	07950	UNSPEC RETROVIRUS INFECTION
	07951	HUMAN T-CELL LYMPH VIRUS TYPE I
	07952	HUMAN T-CELL LYMPH VIRUS TYP II
	07953	HUMAN IMMUNODEFIC VIRUS TYPE 2
	07959	OTHER SPEC RETROVIRUS INFECTION
	1760	KAPOSI'S SARCOMA SKIN
	1761	KAPOSI'S SARCOMA SOFT TISSUE
	1762	KAPOSI'S SARCOMA PALATE
	1763	KAPOSI'S SARCOMA GI SITES
	1764	KAPOSI'S SARCOMA LUNG
	1765	KAPOSI'S SARCOMA LYMPH NODES
	1768	KAPOSI'S SARCOMA OTH SPEC SITES
	1769	KAPOSI'S SARCOMA UNSPECIFIED
	79571	NONSPEC SEROLOGIC EVIDENCE HIV

Trauma

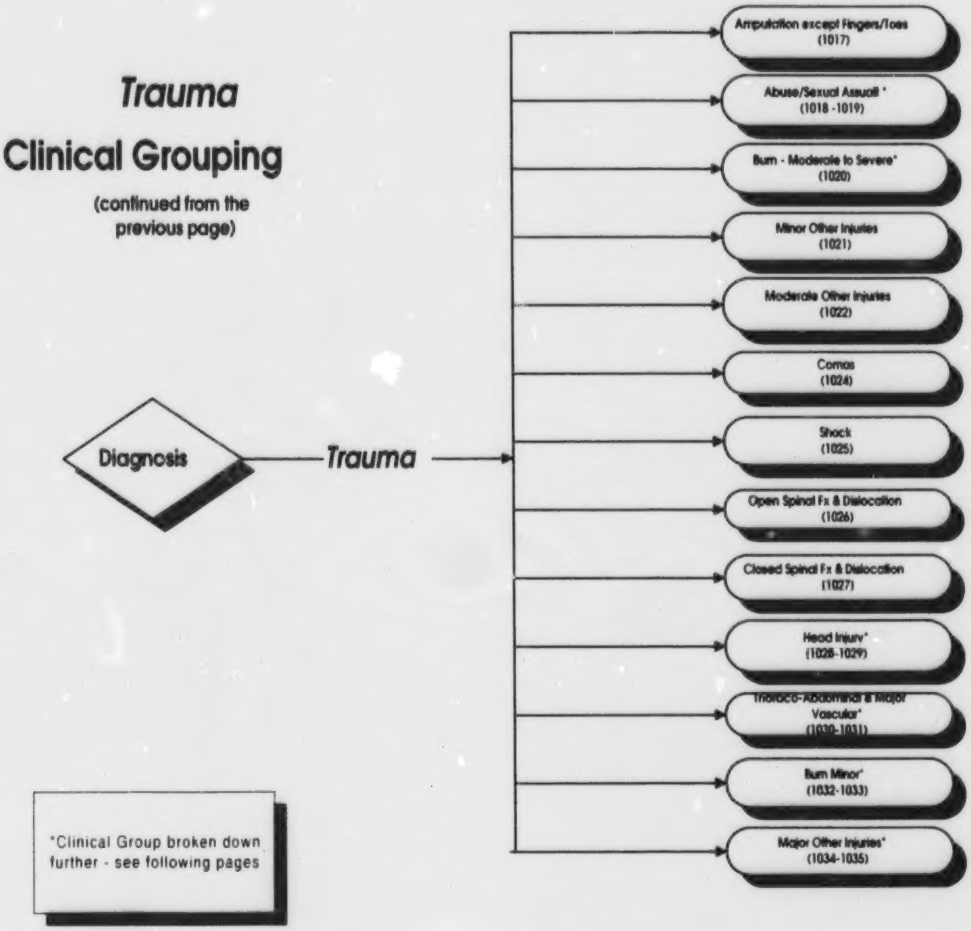
Clinical Grouping

(continued on the next page)


Diagnosis
Trauma
Open Fx Fingers & Toes (1001)
Closed Fx Fingers & Toes (1002)
Fx Nose, Open and Closed (1003)
Open Fx & Dislocations Other (1004)
Closed Fx & Dislocations Other (1005)
Open Wounds without Complications (1007)
Open Wounds with Complications (1008)
Sprains (1009)
Contusions Fingers/Toes (1010)
Contusions except Fingers/Toes (1011)
Open Wound Eye (1012)
Foreign Body Eyes, Ears, Nose (1013)
Foreign Body except Eyes, Ears, Nose (1014)
Poisoning* (1015-1016)
*Clinical Group broken down further - see following pages
ACCS Grouper 04/96

Trauma
Clinical Grouping

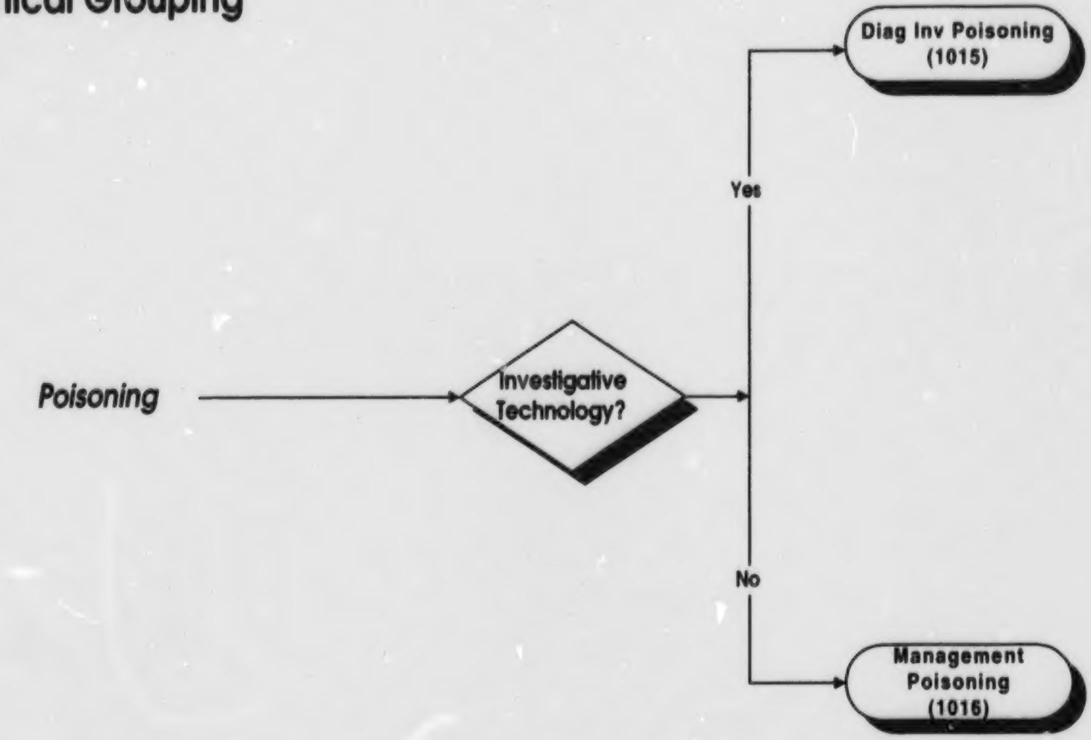
(continued from the previous page)


Diagnosis
Trauma
Amputation except Fingers/Toes (1017)
Abuse/Sexual Assault * (1018 -1019)
Burn - Moderate to Severe* (1020)
Minor Other Injuries (1021)
Moderate Other Injuries (1022)
Comas (1024)
Shock (1025)
Open Spinal Fx & Dislocation (1026)
Closed Spinal Fx & Dislocation (1027)
Head Injury* (1028-1029)
Thoraco-Abdominal & Major Vascular* (1030-1031)
Burn Minor* (1032-1033)
Major Other Injuries* (1034-1035)

*Clinical Group broken down further - see following pages

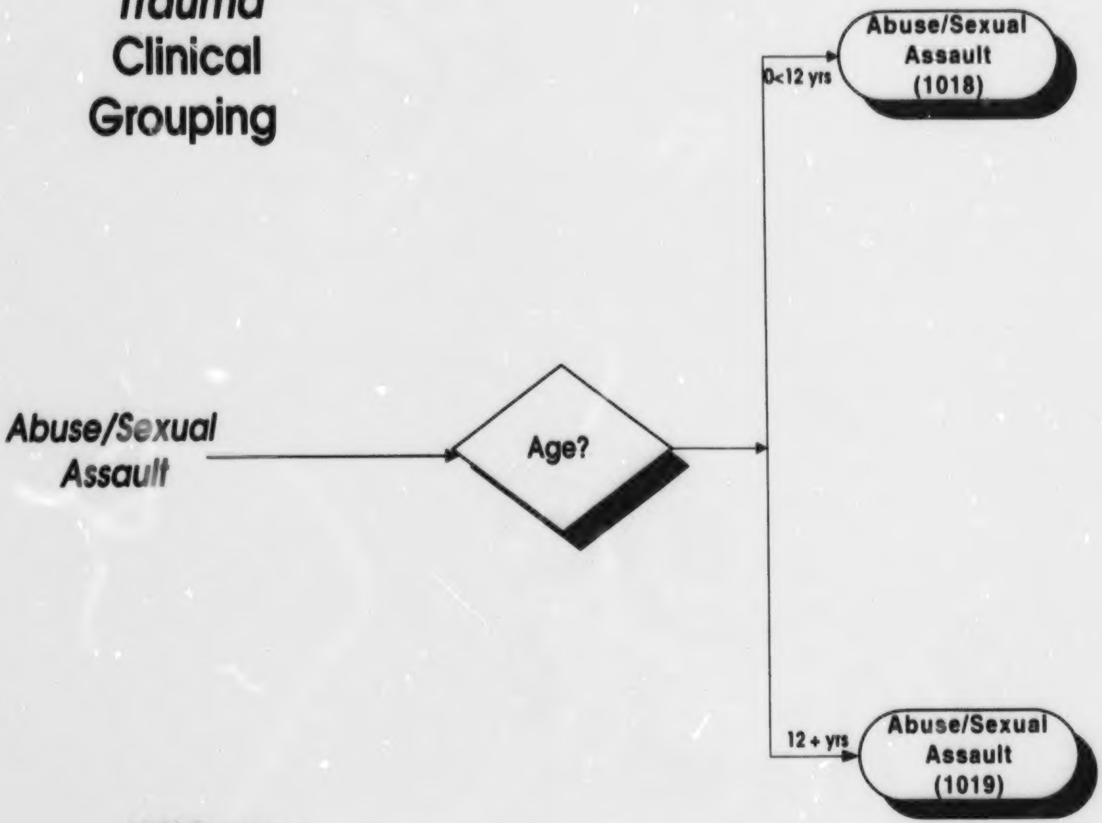
ACCS Grouper
04/00

Trauma
Clinical Grouping


Poisoning
Investigative Technology?
Yes
No
Diag Inv Poisoning (1015)
Management Poisoning (1016)

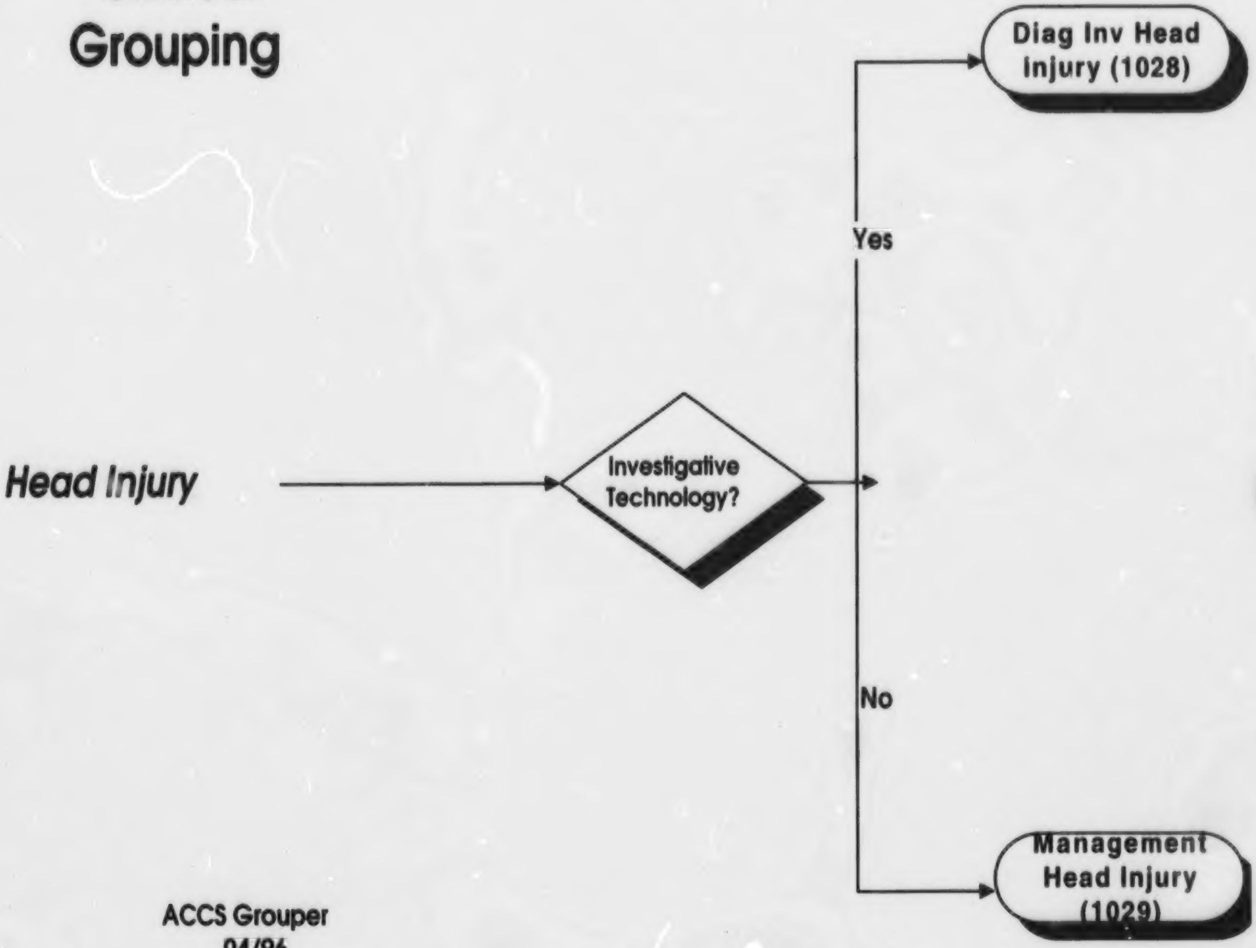
ACCS Grouper
04/96

Trauma Clinical Grouping


Abuse/Sexual Assault
Age?
0<12 yrs
Abuse/Sexual Assault (1018)
12 + yrs
Abuse/Sexual Assault (1019)

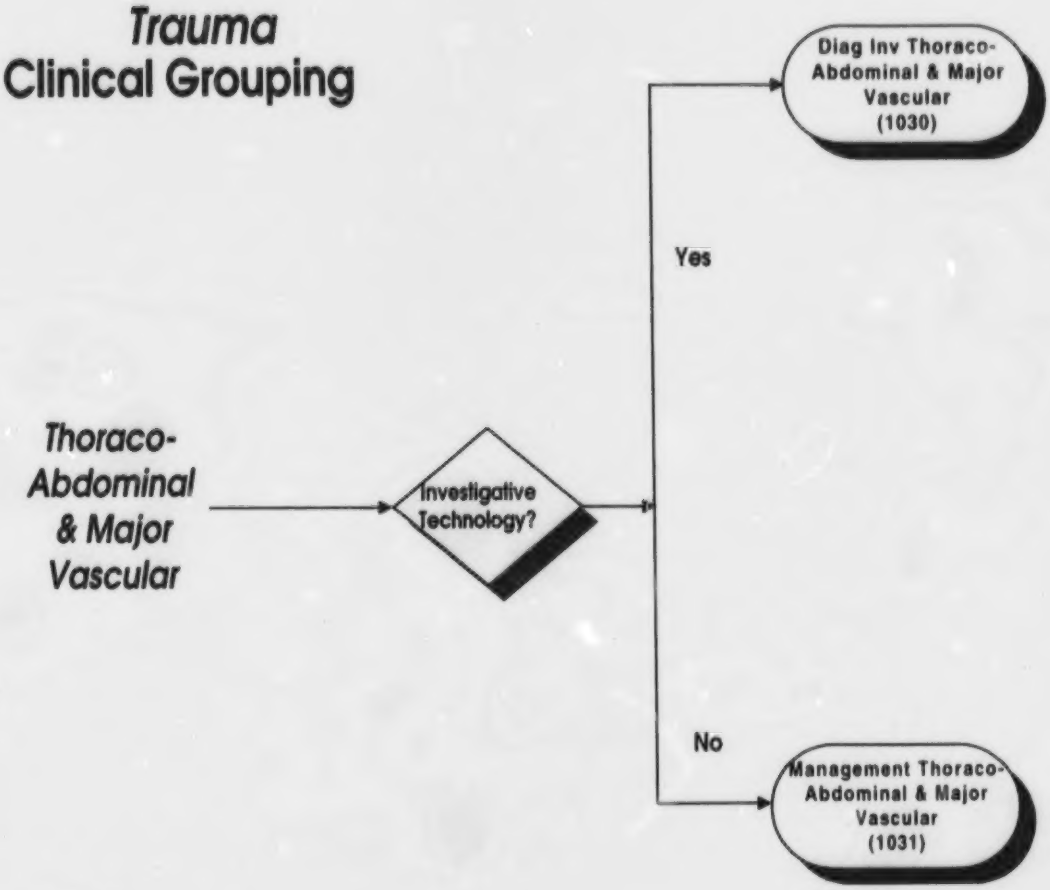
ACCS Grouper
04/00

Trauma Clinical Grouping


Head Injury
Investigative Technology?
Yes
Diag Inv Head Injury (1028)
No
Management Head Injury (1029)

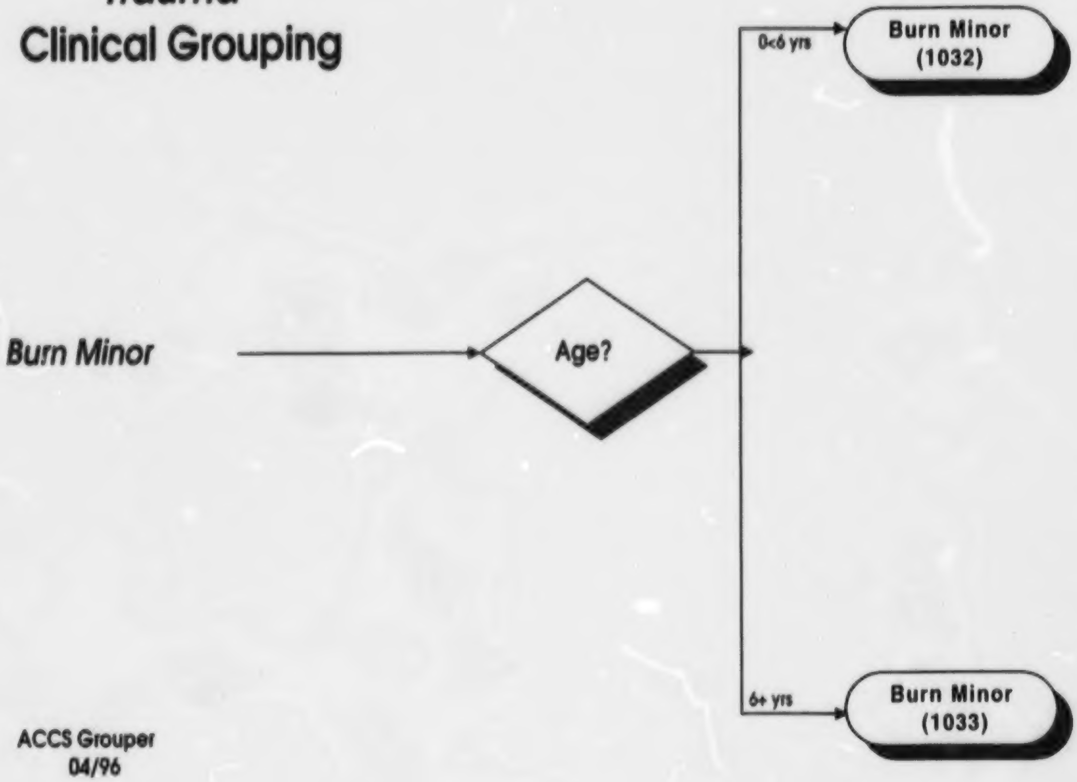
ACCS Grouper
04/96

Trauma Clinical Grouping


Thoraco-
Abdominal
& Major
Vascular
Investigative Technology?
Yes
Diag Inv Thoraco-Abdominal & Major Vascular (1030)
No
Management Thoraco-Abdominal & Major Vascular (1031)

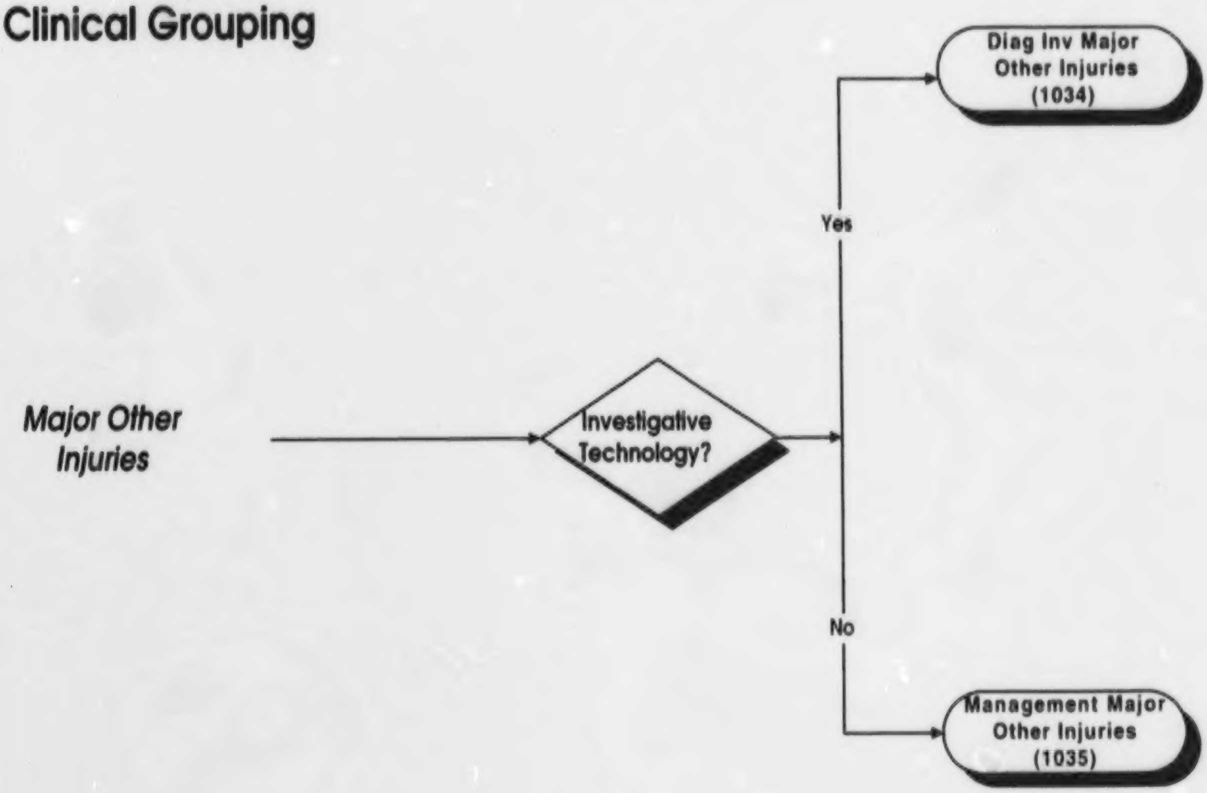
ACCS Grouper
04/96

Trauma
Clinical Grouping


Burn Minor
Age?
0<6 yrs
Burn Minor (1032)
6+ yrs
Burn Minor (1033)

ACCS Grouper
04/96

Trauma Clinical Grouping


Major Other Injuries
Investigative Technology?
Yes
Diag Inv Major Other Injuries (1034)
No
Management Major Other Injuries (1035)

ACCS Grouper
04/96

ACCS CELL
1001 Open Fracture Fingers & Toes

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
1001 OPEN FRACTURE FINGERS & TOES		
	81610	OP # PHALANX/PHALANGES UNSPEC
	81611	OP # MID/PROX PHALANX/PHALANGES
	81612	OP # DISTAL PHALANX/PHALANGES
	81613	OP # MULTIPLE SITES PHALANGES
	8261	FRACTURE PHALANGES FOOT OPEN
	83410	OPEN DISLOCATION FINGER NOS
	83412	OP DISLOC INTERPHALANGEAL HAND
	83816	OP DISLOC INTERPHALANGEAL FOOT

ACCS CELL
1002 Closed Fracture Fingers & Toes

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
1002 CLOSED FRACTURE FINGERS & TOES		
	81600	CL # PHALANX/PHALANGES UNSPEC
	81601	CL # MID/PROX PHALANX/PHALANGES
	81602	CL # DISTAL PHALANX/PHALANGES
	81603	CL # MULTIPLE SITES PHALANGES
	8260	FRACTURE PHALANGES FOOT CLOSED
	83400	CLOSED DISLOCATION FINGER NOS
	83402	CL DISLOC INTERPHALANGEAL HAND
	83806	CL DISLOC INTERPHALANGEAL FOOT

ACCS CELL
1003 Fractured Nose, Open & Closed

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
1003 FRACTURED NOSE, OPEN & CLOSED		
	8020	FRACTURE NASAL BONES CLOSED
	8021	FRACTURE NASAL BONES OPEN

ACCS CELL
1004 Open Fracture and Dislocations Other

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
1004 OPEN FRACTURE AND DISLOCATIONS OTHER		
	80230	OPEN FRACTURE MANDIBLE SITE NOS
	80231	OP # CONDYLAR PROCESS MANDIBLE
	80232	OPEN # SUBCONDYLAR MANDIBLE
	80233	OP # CORONOID PROCESS MANDIBLE
	80234	OP # RAMUS UNSPECIFIED MANDIBLE
	80235	OPEN # ANGLE OF JAW MANDIBLE
	80236	OP # SYMPHYSIS OF BODY MANDIBLE
	80237	OPEN # ALVEOLAR BORDER MANDIBLE
	80238	OP # BODY MANDIBLE OTHER/UNSPEC
	80239	OPEN # MANDIBLE MULTIPLE SITES
	8025	FRACTURE MALAR/MAXILLARY OPEN
	8027	FRACTURE ORBITAL FLOOR OPEN
	8029	FRACTURE OTH FACIAL BONES OPEN
	80710	OPEN FRACTURE RIB(S) UNSPEC
	80711	OPEN FRACTURE ONE RIB
	80712	OPEN FRACTURE TWO RIBS
	80713	OPEN FRACTURE THREE RIBS
	80714	OPEN FRACTURE FOUR RIBS
	80715	OPEN FRACTURE FIVE RIBS
	80716	OPEN FRACTURE SIX RIBS
	80717	OPEN FRACTURE SEVEN RIBS
	80718	OPEN FRACTURE EIGHT/MORE RIBS
	80719	OPEN FRACTURE MULT RIBS UNSPEC
	8073	FRACTURE STERNUM OPEN
	8076	FRACTURE LARYNX/TRACHEA OPEN
	8081	FRACTURE ACETABULUM OPEN
	8083	FRACTURE PUBIS OPEN
	80851	FRACTURE ILIUM OPEN
	80852	FRACTURE ISCHIUM OPEN
	80853	MULT OP PELV # W DISRUPT CIRCLE
	80859	OTHER SPEC FRACTURE PELVIS OPEN
	8089	UNSPEC FRACTURE PELVIS OPEN
	8091	FRACTURE OF TRUNK OPEN
	81010	OPEN # CLAVICLE UNSPEC PART
	81011	OPEN # CLAVICLE STERNAL END
	81012	OPEN FRACTURE CLAVICLE SHAFT
	81013	OPEN # CLAVICLE ACROMIAL END
	81110	OPEN # SCAPULA UNSPEC PART
	81111	OPEN # SCAPULA ACROMIAL PROCESS
	81112	OPEN # SCAPULA CORACOID PROCESS
	81113	OPEN # SCAPULA GLENOID CAV/NECK
	81119	OPEN FRACTURE SCAPULA OTH PART
	81210	OP # HUMERUS UPPER END PART NOS
	81211	OPEN # HUMERUS SURGICAL NECK
	81212	OPEN # HUMERUS ANATOMICAL NECK
	81213	OP # HUMERUS GREATER TUBEROSITY
	81219	OP # HUMERUS UPPER END OTH PART
	81230	OPEN FRACTURE HUMERUS PART NOS
	81231	OPEN FRACTURE SHAFT OF HUMERUS
	81250	OP # HUMERUS LOWER END PART NOS
	81251	OPEN # HUMERUS SUPRACONDYLAR
	81252	OP # HUMERUS LATERAL CONDYLE

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
1004 OPEN FRACTURE AND DISLOCATIONS OTHER		
	81253	OPEN # HUMERUS MEDIAL CONDYLE
	81254	OPEN # HUMERUS CONDYLE UNSPEC
	81259	OP # HUMERUS LOWER END OTH PART
	81310	OPEN # UPPER END FOREARM UNSPEC
	81311	OPEN # OLECRANON PROCESS ULNA
	81312	OPEN # CORONOID PROCESS ULNA
	81313	OPEN MONTEGGIA'S FRACTURE
	81314	OTH/NOS OP # PROXIMAL END ULNA
	81315	OPEN FRACTURE HEAD OF RADIUS
	81316	OPEN FRACTURE NECK OF RADIUS
	81317	OTH/NOS OP # PROXIMAL END RAD
	81318	OP # RADIUS WITH ULNA UPPER END
	81330	OPEN # RADIUS/ULNA SHAFT NOS
	81331	OPEN FRACTURE RADIUS SHAFT
	81332	OPEN FRACTURE ULNA SHAFT
	81333	OPEN # RADIUS WITH ULNA SHAFT
	81350	OP # LOWER END FOREARM UNSPEC
	81351	OPEN COLLES' FRACTURE
	81352	OTHER OPEN # DISTAL END RADIUS
	81353	OPEN FRACTURE DISTAL END ULNA
	81354	OP # RADIUS WITH ULNA LOWER END
	81390	OPEN FRACTURE FOREARM UNSPEC
	81391	OPEN FRACTURE RADIUS (ALONE)
	81392	OPEN FRACTURE ULNA (ALONE)
	81393	OPEN FRACTURE RADIUS W ULNA
	81410	OPEN FRACTURE CARPAL BONE NOS
	81411	OPEN FRACTURE NAVICULAR WRIST
	81412	OP FRACTURE LUNATE BONE WRIST
	81413	OP FRACTURE TRIQUETRAL WRIST
	81414	OPEN FRACTURE PISIFORM WRIST
	81415	OPEN FRACTURE TRAPEZIUM BONE
	81416	OPEN FRACTURE TRAPEZOID BONE
	81417	OPEN FRACTURE CAPITATE BONE
	81418	OPEN FRACTURE HAMATE BONE
	81419	OPEN FRACTURE OTH BONE WRIST
	81510	OPEN FRACTURE METACARPAL NOS
	81511	OP # BASE OF THUMB METACARPAL
	81512	OP # BASE OF OTHER METACARPAL
	81513	OP # SHAFT OF METACARPAL BONE
	81514	OP # NECK OF METACARPAL BONE
	81519	OP # MULTIPLE SITES METACARPUS
	8171	MULTIPLE FRACTURES HAND OPEN
	8181	ILLDEF FRACTURE UPPER LIMB OPEN
	8191	MULT # UPP LIMBS/W RIB/STERN OP
	82010	OP # FEMUR INTRACAPSULAR NOS
	82011	OPEN FRACTURE FEMUR EPIPHYSIS
	82012	OP # FEMUR MIDCERVICAL SECTION
	82013	OPEN # FEMUR BASE OF NECK
	82019	OTH OPEN # FEMUR TRANSCERVICAL
	82030	OPEN # FEMUR TROCHANTERIC NOS
	82031	OPEN # FEMUR INTERTROCHANTERIC
	82032	OPEN # FEMUR SUBTROCHANTERIC
	8209	# UNSPEC PART NECK FEMUR OPEN
	82110	OPEN FRACTURE UNSPEC PART FEMUR
	82111	OPEN FRACTURE SHAFT FEMUR
	82130	OPEN # LOWER END FEMUR NOS

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
1004 OPEN FRACTURE AND DISLOCATIONS OTHER		
	82131	OPEN FRACTURE FEMORAL CONDYLE
	82132	OPEN # LOWER EPIPHYSIS FEMUR
	82133	OPEN # FEMUR SUPRACONDYLAR
	82139	OTHER OPEN # LOWER END FEMUR
	8221	FRACTURE PATELLA OPEN
	82310	OPEN # UPPER END TIBIA ALONE
	82311	OPEN # UPPER END FIBULA ALONE
	82312	OPEN # UPPER END FIBULA W TIBIA
	82330	OPEN # SHAFT TIBIA ALONE
	82331	OPEN # SHAFT FIBULA ALONE
	82332	OPEN # SHAFT FIBULA WITH TIBIA
	82390	OPEN # UNSPEC PART TIBIA ALONE
	82391	OPEN # UNSPEC PART FIBULA ALONE
	82392	OP # UNSPEC PART FIBULA W TIBIA
	8241	FRACTURE MEDIAL MALLEOLUS OPEN
	8243	FRACTURE LATERAL MALLEOLUS OPEN
	8245	FRACTURE BIMALLEOLAR OPEN
	8247	FRACTURE TRIMALLEOLAR OPEN
	8249	UNSPEC FRACTURE ANKLE OPEN
	8251	FRACTURE CALCANEUS OPEN
	82530	OP FRACTURE UNSPEC BONE(S) FOOT
	82531	OPEN FRACTURE ASTRAGALUS
	82532	OPEN FRACTURE NAVICULAR FOOT
	82533	OPEN FRACTURE CUBOID
	82534	OPEN FRACTURE CUNEIFORM FOOT
	82535	OPEN FRACTURE METATARSAL BONE
	82539	OTH OP FRACTURE TARSAL/METATARS
	8271	OTH/MULT FRACTURE LOWER LIMB OP
	8281	MULT # LOW/UP LIMB/RIB/STERN OP
	8291	FRACTURE UNSPECIFIED BONES OPEN
	8301	OPEN DISLOCATION OF JAW
	83110	OPEN DISLOCATION SHOULDER NOS
	83111	OP ANTERIOR DISLOCATION HUMERUS
	83112	OPEN POST DISLOCATION HUMERUS
	83113	OP INFERIOR DISLOCATION HUMERUS
	83114	OP DISLOCATN ACROMIOCLAVICULAR
	83119	OTHER OPEN DISLOCATION SHOULDER
	83210	OPEN DISLOCATION OF ELBOW NOS
	83211	OPEN ANTERIOR DISLOCATION ELBOW
	83212	OP POSTERIOR DISLOCATION ELBOW
	83213	OPEN MEDIAL DISLOCATION ELBOW
	83214	OPEN LATERAL DISLOCATION ELBOW
	83219	OTHER OPEN DISLOCATION ELBOW
	83310	OPEN DISLOCATION OF WRIST NOS
	83311	OP DISLOCATN RADIOULNAR DISTAL
	83312	OPEN DISLOCATION RADIOCARPAL
	83313	OPEN DISLOCATION MIDCARPAL
	83314	OP DISLOCATION CARPOMETACARPAL
	83315	OP DISLOCATION METACARPAL PROX
	83319	OTHER OPEN DISLOCATION WRIST
	83411	OPEN DISLOC METACARPOPHALANGEAL
	83510	OPEN DISLOCATION OF HIP NOS
	83511	OPEN POSTERIOR DISLOCATION HIP
	83512	OPEN OBTURATOR DISLOCATION HIP
	83513	OTH OP ANTERIOR DISLOCATION HIP
	8364	DISLOCATION OF PATELLA OPEN

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
1004 OPEN FRACTURE AND DISLOCATIONS OTHER		
	83660	OPEN DISLOCATION KNEE NOS
	83661	OP ANT DISLOCATN TIBIA PROX END
	83662	OP POST DISLOCAT TIBIA PROX END
	83663	OP MED DISLOCATN TIBIA PROX END
	83664	OP LAT DISLOCATN TIBIA PROX END
	83669	OTHER OPEN DISLOCATION KNEE
	8371	OPEN DISLOCATION OF ANKLE
	83810	OPEN DISLOCATION OF FOOT NOS
	83811	OPEN DISLOCATION TARSAL JNT NOS
	83812	OPEN DISLOCATION MIDTARSAL
	83813	OP DISLOCATION TARSOMETATARSAL
	83814	OP DISLOCATN METATARSAL JNT NOS
	83815	OPEN DISLOC METATARSOPHALANGEAL
	83819	OTHER OPEN DISLOCATION FOOT
	83971	OPEN DISLOCATION OF STERNUM
	83979	OTHER OPEN DISLOCATION
	8399	MULT/ILL-DEF DISLOCATION OPEN

ACCS CELL
1005 Closed Fracture and Dislocations Other

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
1005 CLOSED FRACTURE AND DISLOCATIONS OTHER		
	80220	CL FRACTURE MANDIBLE SITE NOS
	80221	CL # CONDYLAR PROCESS MANDIBLE
	80222	CLOSED # SUBCONDYLAR MANDIBLE
	80223	CL # CORONOID PROCESS MANDIBLE
	80224	CL # RAMUS UNSPECIFIED MANDIBLE
	80225	CLOSED # ANGLE OF JAW MANDIBLE
	80226	CL # SYMPHYSIS OF BODY MANDIBLE
	80227	CL # ALVEOLAR BORDER MANDIBLE
	80228	CL # BODY MANDIBLE OTHER/UNSPEC
	80229	CL # MANDIBLE MULTIPLE SITES
	8024	FRACTURE MALAR/MAXILLARY CLOSED
	8026	FRACTURE ORBITAL FLOOR CLOSED
	8028	FRACTURE OTH FACIAL BONES CLOSE
	80700	CLOSED FRACTURE RIB(S) UNSPEC
	80701	CLOSED FRACTURE ONE RIB
	80702	CLOSED FRACTURE TWO RIBS
	80703	CLOSED FRACTURE THREE RIBS
	80704	CLOSED FRACTURE FOUR RIBS
	80705	CLOSED FRACTURE FIVE RIBS
	80706	CLOSED FRACTURE SIX RIBS
	80707	CLOSED FRACTURE SEVEN RIBS
	80708	CLOSED FRACTURE EIGHT/MORE RIBS
	80709	CLOSED FRACTURE MULT RIBS NOS
	8072	FRACTURE STERNUM CLOSED
	8080	FRACTURE ACETABULUM CLOSED
	8082	FRACTURE PUBIS CLOSED
	80841	FRACTURE ILIUM CLOSED
	80842	FRACTURE ISCHIUM CLOSED
	80843	MULT CL PELV # W DISRUPT CIRCLE
	80849	OTH SPEC FRACTURE PELVIS CLOSED
	8088	UNSPEC FRACTURE PELVIS CLOSED
	8090	FRACTURE OF TRUNK CLOSED
	81000	CLOSED # CLAVICLE UNSPEC PART
	81001	CLOSED # CLAVICLE STERNAL END
	81002	CLOSED FRACTURE CLAVICLE SHAFT
	81003	CLOSED # CLAVICLE ACROMIAL END
	81100	CLOSED # SCAPULA UNSPEC PART
	81101	CL # SCAPULA ACROMIAL PROCESS
	81102	CL # SCAPULA CORACOID PROCESS
	81103	CL # SCAPULA GLENOID CAV/NECK
	81109	CL FRACTURE SCAPULA OTH PART
	81200	CL # HUMERUS UPPER END PART NOS
	81201	CLOSED # HUMERUS SURGICAL NECK
	81202	CL # HUMERUS ANATOMICAL NECK
	81203	CL # HUMERUS GREATER TUBEROSITY
	81209	CL # HUMERUS UPPER END OTH PART
	81220	CL FRACTURE HUMERUS PART UNSPEC
	81221	CLOSED FRACTURE SHAFT HUMERUS
	81240	CL # HUMERUS LOWER END PART NOS
	81241	CLOSED # HUMERUS SUPRACONDYLAR
	81242	CL # HUMERUS LATERAL CONDYLE
	81243	CLOSED # HUMERUS MEDIAL CONDYLE

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
1005 CLOSED FRACTURE AND DISLOCATIONS OTHER		
	81244	CLOSED # HUMERUS CONDYLE UNSPEC
	81249	CL # HUMERUS LOWER END OTH PART
	81300	CL # UPPER END FOREARM UNSPEC
	81301	CLOSED # OLECRANON PROCESS ULNA
	81302	CLOSED # CORONOID PROCESS ULNA
	81303	CLOSED MONTEGGIA'S FRACTURE
	81304	OTH/NOS CL # PROXIMAL END ULNA
	81305	CLOSED FRACTURE HEAD OF RADIUS
	81306	CLOSED FRACTURE NECK OF RADIUS
	81307	OTH/NOS CL # PROXIMAL END RAD
	81308	CL # RADIUS WITH ULNA UPPER END
	81320	CLOSED # RADIUS/ULNA SHAFT NOS
	81321	CLOSED FRACTURE RADIUS SHAFT
	81322	CLOSED FRACTURE ULNA SHAFT
	81323	CLOSED # RADIUS WITH ULNA SHAFT
	81340	CL # LOWER END FOREARM UNSPEC
	81341	CLOSED COLLES' FRACTURE
	81342	OTH CLOSED # DISTAL END RADIUS
	81343	CLOSED FRACTURE DISTAL END ULNA
	81344	CL # RADIUS WITH ULNA LOWER END
	81380	CLOSED FRACTURE FOREARM UNSPEC
	81381	CLOSED FRACTURE RADIUS (ALONE)
	81382	CLOSED FRACTURE ULNA (ALONE)
	81383	CLOSED FRACTURE RADIUS W ULNA
	81400	CLOSED FRACTURE CARPAL BONE NOS
	81401	CLOSED FRACTURE NAVICULAR WRIST
	81402	CL FRACTURE LUNATE BONE WRIST
	81403	CL FRACTURE TRIQUETRAL WRIST
	81404	CLOSED FRACTURE PISIFORM WRIST
	81405	CLOSED FRACTURE TRAPEZIUM BONE
	81406	CLOSED FRACTURE TRAPEZOID BONE
	81407	CLOSED FRACTURE CAPITATE BONE
	81408	CLOSED FRACTURE HAMATE BONE
	81409	CLOSED FRACTURE OTH BONE WRIST
	81500	CLOSED FRACTURE METACARPAL NOS
	81501	CL # BASE OF THUMB METACARPAL
	81502	CL # BASE OF OTHER METACARPAL
	81503	CL # SHAFT OF METACARPAL BONE
	81504	CL # NECK OF METACARPAL BONE
	81509	CL # MULTIPLE SITES METACARPUS
	8170	MULTIPLE FRACTURES HAND CLOSED
	8180	ILLDEF FRACTURE UPP LIMB CLOSED
	8190	MULT # UPP LIMBS/W RIB/STERN CL
	82000	CL # FEMUR INTRACAPSULAR NOS
	82001	CLOSED FRACTURE FEMUR EPIPHYSIS
	82002	CL # FEMUR MIDCERVICAL SECTION
	82003	CLOSED # FEMUR BASE OF NECK
	82009	OTH CL # FEMUR TRANSCERVICAL
	82020	CLOSED # FEMUR TROCHANTERIC NOS
	82021	CL # FEMUR INTERTROCHANTERIC
	82022	CLOSED # FEMUR SUBTROCHANTERIC
	8208	# UNSPEC PART NECK FEMUR CLOSED
	82100	CL FRACTURE UNSPEC PART FEMUR
	82101	CLOSED FRACTURE SHAFT FEMUR
	82120	CLOSED # LOWER END FEMUR NOS
	82121	CLOSED FRACTURE FEMORAL CONDYLE

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
1005 CLOSED FRACTURE AND DISLOCATIONS OTHER		
	82122	CLOSED # LOWER EPIPHYSIS FEMUR
	82123	CLOSED # FEMUR SUPRACONDYLAR
	82129	OTHER CLOSED # LOWER END FEMUR
	8220	FRACTURE PATELLA CLOSED
	82300	CLOSED # UPPER END TIBIA ALONE
	82301	CLOSED # UPPER END FIBULA ALONE
	82302	CLOSED # UPP END FIBULA W TIBIA
	82320	CLOSED # SHAFT TIBIA ALONE
	82321	CLOSED # SHAFT FIBULA ALONE
	82322	CLOSED # SHAFT FIBULA W TIBIA
	82380	CL # UNSPEC PART TIBIA ALONE
	82381	CL # UNSPEC PART FIBULA ALONE
	82382	CL # UNSPEC PART FIBULA W TIBIA
	8240	FRACTURE MEDIAL MALLEOLUS CL
	8242	FRACTURE LATERAL MALLEOLUS CL
	8244	FRACTURE BIMALLEOLAR CLOSED
	8246	FRACTURE TRIMALLEOLAR CLOSED
	8248	UNSPEC FRACTURE ANKLE CLOSED
	8250	FRACTURE CALCANEUS CLOSED
	82520	CL FRACTURE UNSPEC BONE(S) FOOT
	82521	CLOSED FRACTURE ASTRAGALUS
	82522	CLOSED FRACTURE NAVICULAR FOOT
	82523	CLOSED FRACTURE CUBOID
	82524	CLOSED FRACTURE CUNEIFORM FOOT
	82525	CLOSED FRACTURE METATARSAL BONE
	82529	OTH CL FRACTURE TARSAL/METATARS
	8270	OTH/MULT FRACTURE LOWER LIMB CL
	8280	MULT # LOW/UP LIMB/RIB/STERN CL
	8290	FRACTURE UNSPEC BONES CLOSED
	8300	CLOSED DISLOCATION OF JAW
	83100	CLOSED DISLOCATION SHOULDER NOS
	83101	CL ANTERIOR DISLOCATION HUMERUS
	83102	CLOSED POST DISLOCATION HUMERUS
	83103	CL INFERIOR DISLOCATION HUMERUS
	83104	CL DISLOCATN ACROMIOCLAVICULAR
	83109	OTH CLOSED DISLOCATION SHOULDER
	83200	CLOSED DISLOCATION OF ELBOW NOS
	83201	CL ANTERIOR DISLOCATION ELBOW
	83202	CL POSTERIOR DISLOCATION ELBOW
	83203	CLOSED MEDIAL DISLOCATION ELBOW
	83204	CL LATERAL DISLOCATION ELBOW
	83209	OTHER CLOSED DISLOCATION ELBOW
	83300	CLOSED DISLOCATION OF WRIST NOS
	83301	CL DISLOCATN RADIOULNAR DISTAL
	83302	CLOSED DISLOCATION RADIOCARPAL
	83303	CLOSED DISLOCATION MIDCARPAL
	83304	CL DISLOCATION CARPOMETACARPAL
	83305	CL DISLOCATION METACARPAL PROX
	83309	OTHER CLOSED DISLOCATION WRIST
	83401	CL DISLOC METACARPOPHALANGEAL
	83500	CLOSED DISLOCATION OF HIP NOS
	83501	CL POSTERIOR DISLOCATION HIP
	83502	CL OBTURATOR DISLOCATION HIP
	83503	OTH CL ANTERIOR DISLOCATION HIP
	8360	TEAR MED CART/MENISC KNEE CURR
	8361	TEAR LAT CART/MENISC KNEE CURR

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
1005 CLOSED FRACTURE AND DISLOCATIONS OTHER		
	8362	OTH TEAR CART/MENISC KNEE CURR
	8363	DISLOCATION OF PATELLA CLOSED
	83650	CLOSED DISLOCATION KNEE NOS
	83651	CL ANT DISLOCATN TIBIA PROX END
	83652	CL POST DISLOCAT TIBIA PROX END
	83653	CL MED DISLOCATN TIBIA PROX END
	83654	CL LAT DISLOCATN TIBIA PROX END
	83659	OTHER CLOSED DISLOCATION KNEE
	8370	CLOSED DISLOCATION OF ANKLE
	83800	CLOSED DISLOCATION OF FOOT NOS
	83801	CL DISLOCATION TARSAL JNT NOS
	83802	CLOSED DISLOCATION MIDTARSAL
	83803	CL DISLOCATION TARSOMETATARSAL
	83804	CL DISLOCATN METATARSAL JNT NOS
	83805	CL DISLOC METATARSOPHALANGEAL
	83809	OTHER CLOSED DISLOCATION FOOT
	83961	CLOSED DISLOCATION OF STERNUM
	83969	OTHER CLOSED DISLOCATION
	8398	MULT/ILL-DEF DISLOCATION CLOSED

ACCS CELL
1007 Open Wounds Without Complications

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
1007 OPEN WOUNDS WITHOUT COMPLICATIONS		
	87200	OPEN WOUND EXT EAR NOS NO COMPL
	87201	OPEN WOUND AURICLE EAR NO COMPL
	87202	OP WND AUDITORY CANAL NO COMPL
	87261	OPEN WOUND EAR DRUM NO COMPL
	87262	OPEN WOUND OSSICLES NO COMPL
	87263	OP WND EUSTACHIAN TUBE NO COMPL
	87264	OPEN WOUND COCHLEA NO COMPL
	87269	OTH/MULT OPEN WND EAR NO COMPL
	8728	OP WND EAR UNSPEC PART NO COMPL
	8730	OPEN WOUND SCALP NO COMPL
	87320	OP WND NOSE NOS NO COMPLICATION
	87321	OPEN WND NASAL SEPTUM NO COMPL
	87322	OPEN WND NASAL CAVITY NO COMPL
	87323	OPEN WOUND NASAL SINUS NO COMPL
	87329	OP WND MULT SITES NOSE NO COMPL
	87340	OP WND FACE NOS NO COMPLICATION
	87341	OPEN WND CHEEK NO COMPLICATION
	87342	OPEN WOUND FOREHEAD NO COMPL
	87343	OPEN WOUND LIP NO COMPLICATION
	87344	OPEN WOUND JAW NO COMPLICATION
	87349	OTH/MULT OPEN WND FACE NO COMPL
	87360	OPEN WOUND MOUTH NOS NO COMPL
	87361	OP WND BUCCAL MUCOSA NO COMPL
	87362	OPEN WOUND GUM NO COMPLICATION
	87363	OPEN WND TOOTH NO COMPLICATION
	87364	OP WND TONG/FLR MOUTH NO COMPL
	87365	OPEN WND PALATE NO COMPLICATION
	87369	OTH/MULT OP WND MOUTH NO COMPL

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
1007 OPEN WOUNDS WITHOUT COMPLICATIONS		
	8738	OTH/NOS OPEN WND HEAD NO COMPL
	8750	OPEN WOUND CHEST(WALL) NO COMPL
	8760	OPEN WOUND BACK NO COMPLICATION
	8770	OPEN WOUND BUTTOCK NO COMPL
	8780	OPEN WOUND PENIS NO COMPL
	8782	OP WND SCROTUM/TESTES NO COMPL
	8784	OPEN WOUND VULVA NO COMPL
	8786	OPEN WOUND VAGINA NO COMPL
	8788	OTH/NOS OP WND GEN ORG NO COMPL
	8790	OPEN WOUND BREAST NO COMPL
	8792	OPEN WND ANT ABD WALL NO COMPL
	8794	OPEN WND LAT ABD WALL NO COMPL
	8796	OTH/NOS OPEN WND TRUNK NO COMPL
	8798	OPEN WOUND UNSPEC SITE NO COMPL
	88000	OP WND SHOULDER REGION NO COMPL
	88001	OP WND SCAPULAR REGION NO COMPL
	88002	OP WND AXILLARY REGION NO COMPL
	88003	OPEN WOUND UPPER ARM NO COMPL
	88009	MULT OP SHOULD/UPP ARM NO COMPL
	88100	OPEN WOUND FOREARM NO COMPL
	88101	OPEN WND ELBOW NO COMPLICATION
	88102	OPEN WND WRIST NO COMPLICATION
	8820	OP WND HAND EXC FINGER NO COMPL
	8830	OPEN WOUND FINGER(S) NO COMPL
	8840	MULT/NOS OPEN WND ARM NO COMPL
	8850	TRAUM AMPUTATION THUMB NO COMPL
	8860	TRAUM AMPUT OTH FINGER NO COMPL
	8900	OPEN WOUND HIP/THIGH NO COMPL
	8910	OP WND KNEE/LEG/ANKLE NO COMPL
	8920	OPEN WND FOOT EXC TOE NO COMPL
	8930	OPEN WOUND TOE(S) NO COMPL
	8940	MULT/NOS OPEN WND LEG NO COMPL
	8950	TRAUMATIC AMPUT TOE(S) NO COMPL

ACCS CELL
1008 Open Wounds With Complications

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
1008 OPEN WOUNDS WITH COMPLICATIONS		
	87210	OPEN WOUND EXT EAR NOS W COMPL
	87211	OPEN WOUND AURICLE EAR W COMPL
	87212	OPEN WND AUDITORY CANAL W COMPL
	87271	OPEN WOUND EAR DRUM WITH COMPL
	87272	OPEN WOUND OSSICLES WITH COMPL
	87273	OP WND EUSTACHIAN TUBE W COMPL
	87274	OPEN WOUND COCHLEA WITH COMPL
	87279	OTH/MULT OPEN WOUND EAR W COMPL
	8729	OP WND EAR UNSPEC PART W COMPL
	8731	OPEN WOUND SCALP W COMPLICATION
	87330	OP WND NOSE NOS W COMPLICATION
	87331	OPEN WOUND NASAL SEPTUM W COMPL
	87332	OPEN WOUND NASAL CAVITY W COMPL
	87333	OPEN WOUND NASAL SINUS W COMPL
	87339	OP WND MULT SITES NOSE W COMPL
	87350	OP WND FACE NOS W COMPLICATION
	87351	OPEN WOUND CHEEK W COMPLICATION
	87352	OPEN WOUND FOREHEAD W COMPL
	87353	OPEN WOUND LIP W COMPLICATION
	87354	OPEN WOUND JAW W COMPLICATION
	87359	OTH/MULT OPEN WND FACE W COMPL
	87370	OPEN WOUND MOUTH NOS W COMPL
	87371	OPEN WND BUCCAL MUCOSA W COMPL
	87372	OPEN WOUND GUM W COMPLICATION
	87373	OPEN WOUND TOOTH W COMPLICATION
	87374	OP WND TONGUE/FLR MOUTH W COMPL
	87375	OPEN WND PALATE W COMPLICATION
	87379	OTH/MULT OPEN WND MOUTH W COMPL
	8739	OTH/NOS OPEN WOUND HEAD W COMPL
	8751	OPEN WOUND CHEST (WALL) W COMPL
	8761	OPEN WOUND BACK W COMPLICATION
	8771	OPEN WOUND BUTTOCK WITH COMPL
	8781	OPEN WOUND PENIS W COMPLICATION
	8783	OPEN WND SCROTUM/TESTES W COMPL
	8785	OPEN WOUND VULVA W COMPLICATION
	8787	OPEN WOUND VAGINA WITH COMPL
	8789	OTH/NOS OP WND GEN ORG W COMPL
	8791	OPEN WOUND BREAST WITH COMPL
	8793	OPEN WOUND ANT ABD WALL W COMPL
	8795	OPEN WOUND LAT ABD WALL W COMPL
	8797	OTH/NOS OPEN WND TRUNK W COMPL
	8799	OPEN WOUND UNSPEC SITE W COMPL
	88010	OP WND SHOULDER REGION W COMPL
	88011	OP WND SCAPULAR REGION W COMPL
	88012	OP WND AXILLARY REGION W COMPL
	88013	OPEN WOUND UPPER ARM WITH COMPL
	88019	MULT OP SHOULD/UPP ARM W COMPL
	88020	OP WND SHOULDER REGION W TENDON
	88021	OP WND SCAPULAR REGION W TENDON
	88022	OP WND AXILLARY REGION W TENDON
	88023	OPEN WOUND UPPER ARM W TENDON
	88029	MULT OP SHOULD/UPP ARM W TENDON

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
1008 OPEN WOUNDS WITH COMPLICATIONS		
	88110	OPEN WOUND FOREARM WITH COMPL
	88111	OPEN WOUND ELBOW W COMPLICATION
	88112	OPEN WOUND WRIST W COMPLICATION
	88120	OPEN WOUND FOREARM WITH TENDON
	88121	OPEN WOUND ELBOW WITH TENDON
	88122	OPEN WOUND WRIST WITH TENDON
	8821	OP WND HAND EXC FINGER W COMPL
	8822	OP WND HAND EXC FINGER W TENDON
	8831	OPEN WOUND FINGER(S) WITH COMPL
	8832	OPEN WOUND FINGER(S) W TENDON
	8841	MULT/NOS OPEN WND ARM W COMPL
	8842	MULT/NOS OPEN WND ARM W TENDON
	8851	TRAUM AMPUTATION THUMB W COMPL
	8861	TRAUM AMPUT OTH FINGER W COMPL
	8901	OPEN WOUND HIP/THIGH WITH COMPL
	8902	OPEN WOUND HIP/THIGH W TENDON
	8911	OPEN WND KNEE/LEG/ANKLE W COMPL
	8912	OPEN WND KNEE/LEG/ANKLE W TEND
	8921	OPEN WOUND FOOT EXC TOE W COMPL
	8922	OPEN WOUND FOOT EXC TOE W TEND
	8931	OPEN WOUND TOE(S) WITH COMPL
	8932	OPEN WOUND TOE(S) WITH TENDON
	8941	MULT/NOS OPEN WOUND LEG W COMPL
	8942	MULT/NOS OPEN WOUND LEG W TEND
	8951	TRAUMATIC AMPUT TOE(S) W COMPL

ACCS CELL
1009 Sprains

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
1009 SPRAINS		
	8400	SPRAIN/STRAIN ACROMIOCLAVICULAR
	8401	SPRAINS/STRAIN CORACOCLAVICULAR
	8402	SPRAINS/STRAINS CORACOHUMERAL
	8403	SPRAINS/STRAINS INFRASPINATUS
	8404	SPRAINS/STRAINS OF ROTATOR CUFF
	8405	SPRAINS/STRAINS SUBSCAPULARIS
	8406	SPRAINS/STRAINS SUPRASPINATUS
	8408	OTH SPRAIN/STRAIN SHOULD/UP ARM
	8409	SPRAIN/STRAIN SHOULD/UP ARM NOS
	8410	SPRAIN/STRAIN RADIAL COLLAT LIG
	8411	SPRAINS/STRAIN ULNAR COLLAT LIG
	8412	SPRAINS/STRAINS OF RADIOHUMERAL
	8413	SPRAINS AND STRAINS ULNOHUMERAL
	8418	OTH SPRAIN/STRAIN ELBOW/FOREARM
	8419	SPRAIN/STRAIN ELBOW/FOREARM NOS
	84200	SPRAINS/STRAINS WRIST UNSPEC
	84201	SPRAINS AND STRAINS CARPAL
	84202	SPRAINS AND STRAINS RADIOCARPAL
	84209	OTHER SPRAINS AND STRAINS WRIST
	84210	SPRAINS AND STRAINS OF HAND NOS
	84211	SPRAINS/STRAINS CARPOMETACARPAL
	84212	SPRAINS/STRAIN METACARPOPHALANG

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
1009 SPRAINS		
	84213	SPRAINS/STRAINS INTERPHALANGEAL
	84219	OTHER SPRAINS AND STRAINS HAND
	8430	SPRAINS AND STRAINS ILIOFEMORAL
	8431	SPRAINS/STRAINS ISCHIOCAPSULAR
	8438	OTHER SPRAINS/STRAINS HIP/THIGH
	8439	SPRAINS/STRAINS HIP/THIGH NOS
	8440	SPRAINS/STRAINS LAT COLLAT KNEE
	8441	SPRAINS/STRAINS MED COLLAT KNEE
	8442	SPRAIN/STRAIN CRUCIATE LIG KNEE
	8443	SPRAINS/STRAIN TIBIOFIBULAR SUP
	8448	OTHER SPRAINS/STRAINS KNEE/LEG
	8449	SPRAINS/STRAINS KNEE/LEG UNSPEC
	84500	SPRAINS AND STRAINS ANKLE NOS
	84501	SPRAINS/STRAINS DELTOID ANKLE
	84502	SPRAINS/STRAINS CALCANEOFIBULAR
	84503	SPRAIN/STRAIN TIBIOFIBULAR DIST
	84509	OTHER SPRAINS AND STRAINS ANKLE
	84510	SPRAINS AND STRAINS OF FOOT NOS
	84511	SPRAINS/STRAINS TARSOMETATARSAL
	84512	SPRAINS/STRAIN METATARSOPHALANG
	84513	SPRAINS/STRAIN INTERPHALANG TOE
	84519	OTHER SPRAINS AND STRAINS FOOT
	8460	SPRAINS AND STRAINS LUMBOSACRAL
	8461	SPRAINS/STRAINS SACROILIAC LIG
	8462	SPRAINS/STRAINS SACROSPINATUS
	8463	SPRAINS/STRAINS SACROTUBEROUS
	8468	OTH SPRAINS/STRAINS SACROILIAC
	8469	SPRAINS/STRAINS SACROILIAC NOS
	8470	SPRAINS AND STRAINS OF NECK
	8471	SPRAINS AND STRAINS THORACIC
	8472	SPRAINS AND STRAINS LUMBAR
	8473	SPRAINS AND STRAINS OF SACRUM
	8474	SPRAINS AND STRAINS OF COCCYX
	8479	SPRAINS AND STRAINS BACK UNSPEC
	8480	SPRAIN/STRAIN SEPTAL CART NOSE
	8481	SPRAINS AND STRAINS OF JAW
	8482	SPRAINS AND STRAINS THYROID REG
	8483	SPRAINS AND STRAINS OF RIBS
	84840	SPRAINS AND STRAINS STERNUM NOS
	84841	SPRAINS/STRAIN STERNOCLAVICULAR
	84842	SPRAINS/STRAINS CHONDROSTERNAL
	84849	OTH SPRAINS AND STRAINS STERNUM
	8485	SPRAINS AND STRAINS OF PELVIS
	8488	SPRAINS/STRAINS OTH SPEC SITE
	8489	SPRAIN AND STRAIN UNSPEC SITE

ACCS CELL
1010 Contusions Fingers/Toes

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
1010 CONTUSIONS FINGERS/TOES		
	9233	CONTUSION OF FINGER
	9243	CONTUSION OF TOE
	9273	CRUSHING INJURY OF FINGER
	9283	CRUSHING INJURY OF TOE(S)

ACCS CELL
1011 Contusions Except Fingers/Toes

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
1011 CONTUSIONS EXCEPT FINGERS/TOES		
	920	CONTUSN FACE/SCALP/NECK EXC EYE
	9210	BLACK EYE NOS
	9211	CONTUSION OF EYELIDS/PERIOCULAR
	9212	CONTUSION OF ORBITAL TISSUES
	9213	CONTUSION OF EYEBALL
	9219	UNSPECIFIED CONTUSION OF EYE
	9220	CONTUSION OF BREAST
	9221	CONTUSION OF CHEST WALL
	9222	CONTUSION OF ABDOMINAL WALL
	92231	CONTUSION OF BACK
	92232	CONTUSION OF BUTTOCK
	92233	CONTUSION OF INTERCAPSULAR REGION
	9224	CONTUSION OF GENITAL ORGANS
	9228	CONTUSION MULTIPLE SITES TRUNK
	9229	CONTUSION UNSPEC PART TRUNK
	92300	CONTUSION OF SHOULDER REGION
	92301	CONTUSION OF SCAPULAR REGION
	92302	CONTUSION OF AXILLARY REGION
	92303	CONTUSION OF UPPER ARM
	92309	CONTUSION MULT SHOULDER/UPP ARM
	92310	CONTUSION OF FOREARM
	92311	CONTUSION OF ELBOW
	92320	CONTUSION OF HAND(S)
	92321	CONTUSION OF WRIST
	9238	CONTUSION MULTIPLE UPPER LIMB
	9239	CONTUSION UNSPEC PART UPP LIMB
	92400	CONTUSION OF THIGH
	92401	CONTUSION OF HIP
	92410	CONTUSION OF LOWER LEG
	92411	CONTUSION OF KNEE
	92420	CONTUSION OF FOOT
	92421	CONTUSION OF ANKLE
	9244	CONTUSION MULTIPLE LOWER LIMB
	9245	CONTUSION UNSPEC PART LOW LIMB
	9248	CONTUSION MULTIPLE SITES NEC
	9249	CONTUSION UNSPECIFIED SITE
	9251	CRUSHING INJURY OF FACE/SCALP
	9252	CRUSHING INJURY OF NECK

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
1011 CONTUSIONS EXCEPT FINGERS/TOES		
	9260	CRUSHING INJURY EXT GENITALIA
	92611	CRUSHING INJURY OF BACK
	92612	CRUSHING INJURY OF BUTTOCK
	92619	CRUSH INJ OTH SPEC SITES TRUNK
	9268	CRUSHING INJ MULT SITES TRUNK
	9269	CRUSHING INJ UNSPEC PART TRUNK
	92700	CRUSHING INJURY SHOULDER REGION
	92701	CRUSHING INJURY SCAPULAR REGION
	92702	CRUSHING INJURY AXILLARY REGION
	92703	CRUSHING INJURY OF UPPER ARM
	92709	CRUSH INJ MULT SHOULDER/UPP ARM
	92710	CRUSHING INJURY OF FOREARM
	92711	CRUSHING INJURY OF ELBOW
	92720	CRUSHING INJURY OF HAND
	92721	CRUSHING INJURY OF WRIST
	9278	CRUSH INJ MULT SITES UPPER LIMB
	9279	CRUSH INJ UNSPEC PART UPP LIMB
	92800	CRUSHING INJURY OF THIGH
	92801	CRUSHING INJURY OF HIP
	92810	CRUSHING INJURY OF LOWER LEG
	92811	CRUSHING INJURY OF KNEE
	92820	CRUSHING INJURY OF FOOT
	92821	CRUSHING INJURY OF ANKLE
	9288	CRUSH INJ MULT SITES LOWER LIMB
	9289	CRUSH INJ UNSPEC SITE LOW LIMB
	9290	CRUSHING INJURY MULT SITES NEC
	9299	CRUSHING INJURY OF UNSPEC SITE

ACCS CELL
1012 Open Wound Eye

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
1012 OPEN WOUND EYE		
	8700	LACN SKIN EYELID AND PERIOCULAR
	8701	LACN EYELID FULL THICK NOT LACR
	8702	LACN EYELID W LACRIMAL PASSAGES
	8703	PENETRATING WOUND ORBIT NO FB
	8704	PENETRATING WOUND ORBIT WITH FB
	8708	OTH SPEC OPEN WND OCULAR ADNEXA
	8709	UNSPEC OPEN WOUND OCULAR ADNEXA
	8710	OCULAR LACN NO PROLAPSE TISSUE
	8711	OCULAR LACN W PROLAP/EXPOS TISS
	8712	RUPT EYE PART LOSS INTRAOC TISS
	8713	AVULSION OF EYE
	8714	UNSPECIFIED LACERATION OF EYE
	8715	PENETRATION EYEBALL MAGNETIC FB
	8716	PENETRATN EYEBALL NONMAGNET FB
	8717	UNSPECIFIED OCULAR PENETRATION
	8719	UNSPECIFIED OPEN WOUND EYEBALL

ACCS CELL
1013 Foreign Body Eyes, Ears, Nose

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
1013 FOREIGN BODY EYES, EARS, NOSE		
	9300	CORNEAL FOREIGN BODY
	9301	FOREIGN BODY CONJUNCTIVAL SAC
	9302	FOREIGN BODY LACRIMAL PUNCTUM
	9308	OTH/COMBIN FOREIGN BODY EXT EYE
	9309	UNSPEC FOREIGN BODY ON EXT EYE
	931	FOREIGN BODY IN EAR
	932	FOREIGN BODY IN NOSE
	9350	FOREIGN BODY IN MOUTH

ACCS CELL
1014 Foreign Body Except Eyes Ears, Nose

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
1014 FOREIGN BODY EXCEPT EYES, EARS, NOSE		
	9116	SUPERFICIAL FB NO INFECT TRUNK
	9117	SUPERFICIAL FB W INFECT TRUNK
	9136	SUPRFIC FB NO INFECTION LOW ARM
	9137	SUPRFIC FB W INFECTION LOW ARM
	9146	SUPRFIC FB NO INFECTION HAND
	9147	SUPRFIC FB WITH INFECTION HAND
	9156	SUPRFIC FB NO INFECTION FINGER
	9157	SUPRFIC FB W INFECTION FINGER
	9166	SUPRFIC FB NO INFECTION HIP/LEG
	9167	SUPRFIC FB W INFECTION HIP/LEG
	9176	SUPRFIC FB NO INFECT FOOT/TOE
	9177	SUPRFIC FB W INFECTION FOOT/TOE
	9196	SUPRFIC FB NO INFECT MULT/NOS
	9197	SUPRFIC FB W INFECTION MULT/NOS
	9330	FOREIGN BODY IN PHARYNX
	9331	FOREIGN BODY IN LARYNX
	9340	FOREIGN BODY IN TRACHEA
	9341	FOREIGN BODY IN MAIN BRONCHUS
	9348	FB IN OTH SPEC PART BRONCH/LUNG
	9349	FB IN RESPIRATORY TREE UNSPEC
	9351	FOREIGN BODY IN ESOPHAGUS
	9352	FOREIGN BODY IN STOMACH
	936	FOREIGN BODY IN INTESTINE/COLON
	937	FOREIGN BODY IN ANUS AND RECTUM
	938	FOREIGN BODY DIGEST SYSTEM NOS
	9390	FOREIGN BODY IN BLADDER/URETHRA
	9391	FOREIGN BODY IN UTERUS ANY PART
	9392	FOREIGN BODY IN VULVA/VAGINA
	9393	FOREIGN BODY IN PENIS
	9399	FB GENITOURINARY TRACT UNSPEC

ACCS CELL
1015-1016 Poisoning

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
1015-1016 DIAG INV & MANAGEMENT POISONING		
	7794	DRUG RXNS/INTOX SPEC TO NEWBORN
	7960	NONSPEC ABNORMAL TOXICOLOGICAL
	9090	LATE EFFECT POISONING DRUG/MED
	9091	LATE EFF TOXIC EFF NONMED SUBST
	9095	LATE EFF/ADVERSE EFF DRUG/MED
	9600	POISONING BY PENICILLINS
	9601	POISON ANTIFUNGAL ANTIBIOTICS
	9602	POISONING CHLORAMPHENICOL GROUP
	9603	POISON ERYTHROMYCIN/MACROLIDES
	9604	POISONING BY TETRACYCLINE GROUP
	9605	POISONING BY CEFALOSPORIN GROUP
	9606	POISON ANTIMYCOBACT ANTIBIOTICS
	9607	POISON ANTINEOPLAST ANTIBIOTICS
	9608	POISONING OTH SPEC ANTIBIOTICS
	9609	POISONING BY UNSPEC ANTIBIOTIC
	9610	POISONING BY SULFONAMIDES
	9611	POISON ARSENICAL ANTIINFECTIVES
	9612	POISON HEAVY METAL ANTIINFECT
	9613	POISONING QUINOLINE/HYDROXYQUIN
	9614	POIS ANTIMALARIAL/BLD PROTOZOA
	9615	POISON OTH ANTIPROTOZOAL DRUGS
	9616	POISONING BY ANTHELMINTICS
	9617	POISONING BY ANTIVIRAL DRUGS
	9618	POISON OTHER ANTIMYCOBACTERIAL
	9619	POISON OTHER/NOS ANTIINFECTIVES
	9620	POISON ADRENAL CORTICAL STEROID
	9621	POIS ANDROGEN/ANABOLIC CONGENER
	9622	POIS OVARIAN HORMONE/SYNTHETIC
	9623	POIS INSULIN/ANTIDIABETIC AGENT
	9624	POISON ANT PITUITARY HORMONES
	9625	POISON POST PITUITARY HORMONES
	9626	POISON PARATHYROID/DERIVATIVES
	9627	POISONING THYROID/DERIVATIVES
	9628	POISONING BY ANTITHYROID AGENTS
	9629	POIS OTH/NOS HORMONES/SYNTHETIC
	9630	POISON ANTIALLERGIC/ANTIEMETIC
	9631	POIS ANTINEOPLAST/IMMUNOSUPPRES
	9632	POISONING BY ACIDIFYING AGENTS
	9633	POISONING BY ALKALIZING AGENTS
	9634	POISONING BY ENZYMES NEC
	9635	POISONING BY VITAMINS NEC
	9636	POISON OTH SPEC SYSTEMIC AGENTS
	9639	POISONING UNSPEC SYSTEMIC AGENT
	9640	POISONING BY IRON AND COMPOUNDS
	9641	POIS LIVER PREP/OTH ANTIANEMIC
	9642	POISONING BY ANTICOAGULANTS
	9643	POISONING BY VITAMIN K
	9644	POISON FIBRINOLYSIS-AFFECT DRUG
	9645	POIS ANTICOAG ANTAGON/OTH COAG
	9646	POISONING BY GAMMA GLOBULIN
	9647	POISONING NATURAL BLOOD/PRODUCT
	9648	POISON OTH AGENTS AFFECT BLOOD

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
1015-1016 DIAG INV & MANAGEMENT POISONING		
	9649	POISON AGENT AFFECT BLOOD NOS
	96500	POISONING BY OPIUM UNSPECIFIED
	96501	POISONING BY HEROIN
	96502	POISONING BY METHADONE
	96509	POISON OTH OPIATES/REL NARCOTIC
	9651	POISONING BY SALICYLATES
	9654	POISON AROMATIC ANALGESICS NEC
	9655	POISONING PYRAZOLE DERIVATIVES
	9657	POIS OTH NON-NARCOTIC ANALGESIC
	9658	POIS OTH SPEC ANALGESIC/ANTIPYR
	9659	POISON UNSPEC ANALGESIC/ANTIPYR
	96561	POIS PROPIONIC ACID DERIVATIVES
	96569	POISONING BY OTH ANTIRHEUMATICS
	96561	POIS PROPIONIC ACID DERIVATIVES
	96569	POISONING BY OTH ANTIRHEUMATICS
	9660	POISON OXAZOLIDINE DERIVATIVES
	9661	POISONING HYDANTOIN DERIVATIVES
	9662	POISONING BY SUCCINIMIDES
	9663	POISON OTH/NOS ANTICONVULSANTS
	9664	POISON ANTI-PARKINSONISM DRUGS
	9670	POISONING BY BARBITURATES
	9671	POISONING CHLORAL HYDRATE GROUP
	9672	POISONING BY PARALDEHYDE
	9673	POISONING BY BROMINE COMPOUNDS
	9674	POISON METHAQUALONE COMPOUNDS
	9675	POISONING BY GLUTETHIMIDE GROUP
	9676	POISONING MIXED SEDATIVES NEC
	9678	POISONING OTH SEDATIVE/HYPNOTIC
	9679	POISONING SEDATIVE/HYPNOTIC NOS
	9680	POIS CNS MUSCLETONE DEPRESSANTS
	9681	POISONING BY HALOTHANE
	9682	POISON OTH GASEOUS ANESTHETICS
	9683	POISON INTRAVENOUS ANESTHETICS
	9684	POISON OTH/NOS GEN ANESTHETICS
	9685	POISON SURFACE/INFILTRAT ANESTH
	9686	POIS PERIPH NERVE/PLEXUS BLOCK
	9687	POISONING BY SPINAL ANESTHETICS
	9689	POISON OTH/UNSPEC LOCAL ANESTH
	9690	POISONING BY ANTIDEPRESSANTS
	9691	POIS PHENOTHIAZINE-BAS TRANQUIL
	9692	POIS BUTYROPHENONE-BAS TRANQUIL
	9693	POISON OTHER ANTIPSYCH/TRANQUIL
	9694	POISON BENZODIAZEPINE TRANQUIL
	9695	POISONING OTHER TRANQUILIZERS
	9696	POISONING BY PSYCHODYSLEPTICS
	9697	POISONING BY PSYCHOSTIMULANTS
	9698	POISONING OTH SPEC PSYCHOTROPIC
	9699	POISONING UNSPEC PSYCHOTROPIC
	9700	POISONING BY ANALEPTICS
	9701	POISONING BY OPIATE ANTAGONISTS
	9708	POISON OTH SPEC CNS STIMULANTS
	9709	POISONING UNSPEC CNS STIMULANT
	9710	POISONING PARASYMPATHOMIMETICS
	9711	POIS PARASYMPATHOLYT/SPASMOLYT
	9712	POISONING BY SYMPATHOMIMETICS
	9713	POISONING BY SYMPATHOLYTICS

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
1015-1016 DIAG INV & MANAGEMENT POISONING		
	9719	POIS AUTONOM NERV SYS DRUG NOS
	9720	POISON CARDIAC RHYTHM REGULATOR
	9721	POISON CARDIOTONIC GLYCOSIDES
	9722	POIS ANTILIPEM/ANTIARTERIOSCLER
	9723	POISON GANGLION-BLOCKING AGENTS
	9724	POISONING CORONARY VASODILATORS
	9725	POISONING OTHER VASODILATORS
	9726	POISONING OTH ANTIHYPERTENSIVE
	9727	POISONING BY ANTIVARICOSE DRUGS
	9728	POISONING CAPILLARY-ACTIVE DRUG
	9729	POISON OTH/NOS CARDIOVASC AGENT
	9730	POIS ANTACIDS/ANTIGASTR SECRETN
	9731	POISONING BY IRRITANT CATHARTIC
	9732	POISONING EMOLLIENT CATHARTICS
	9733	POISONING BY OTHER CATHARTICS
	9734	POISONING BY DIGESTANTS
	9735	POISONING BY ANTIDIARRHEAL DRUG
	9736	POISONING BY EMETICS
	9738	POISON OTHER GASTROINTEST AGENT
	9739	POISON GASTROINTEST AGENT NOS
	9740	POISONING MERCURIAL DIURETICS
	9741	POIS PURINE DERIVATIVE DIURETIC
	9742	POIS CARBON AC ANHYDRASE INHIB
	9743	POISONING BY SALURETICS
	9744	POISONING BY OTHER DIURETICS
	9745	POIS ELECTROLYT/CALORIC/BALANCE
	9746	POISONING OTH MINERAL SALTS NEC
	9747	POIS URIC ACID METABOLISM DRUG
	9750	POISONING BY OXYTOCIC AGENTS
	9751	POISON SMOOTH MUSCLE RELAXANTS
	9752	POISON SKELETAL MUSCLE RELAXANT
	9753	POISONING OTH/NOS DRUGS MUSCLES
	9754	POISONING BY ANTITUSSIVES
	9755	POISONING BY EXPECTORANTS
	9756	POISONING ANTI-COMMON COLD DRUG
	9757	POISONING BY ANTIASTHMATICS
	9758	POISON OTH/NOS RESPIRATORY DRUG
	9760	POIS LOC ANTIINFECT/ANTIINFLAM
	9761	POISONING BY ANTIPRURITICS
	9762	POISON LOC ASTRINGENT/DETERGENT
	9763	POIS EMOLLIENT/DEMULCENT/PROTEC
	9764	POISON HAIR TREATMENT DRUG/PREP
	9765	POISON ANTIINFECT/OTH DRUG EYE
	9766	POISON ANTIINFECT/OTH ENT DRUG
	9767	POISONING DENTAL DRUGS TOPICAL
	9768	POIS OTH SKIN/MUCOUS MEMB AGENT
	9769	POIS SKIN/MUCOUS MEMB AGENT NOS
	9770	POISONING BY DIETETICS
	9771	POISONING BY LIPOTROPIC DRUGS
	9772	POIS ANTIDOTES/CHELAT AGENT NEC
	9773	POISONING BY ALCOHOL DETERRENTS
	9774	POISON PHARMACEUTICAL EXCIPIENT
	9778	POISON OTH SPEC DRUGS/MEDICINAL
	9779	POISONING UNSPEC DRUG/MEDICINAL
	9780	POISONING BY BCG VACCINE
	9781	POISON TYPHOID/PARATYPH VACCINE

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
1015-1016 DIAG INV & MANAGEMENT POISONING		
	9782	POISONING BY CHOLERA VACCINE
	9783	POISONING BY PLAGUE VACCINE
	9784	POISONING BY TETANUS VACCINE
	9785	POISONING BY DIPHTHERIA VACCINE
	9786	POISONING BY PERTUSSIS VACCINE
	9788	POISONING OTH/NOS BACT VACCINE
	9789	POISONING MIXED BACT VACCINES
	9790	POISONING BY SMALLPOX VACCINE
	9791	POISONING BY RABIES VACCINE
	9792	POISONING BY TYPHUS VACCINE
	9793	POISONING YELLOW FEVER VACCINE
	9794	POISONING BY MEASLES VACCINE
	9795	POISONING POLIOMYELITIS VACCINE
	9796	POIS OTH/NOS VIR/RICKET VACCINE
	9797	POISON MIXED BACT/VIRAL VACCINE
	9799	POISON OTH/NOS VACCINES/BIOLOG
	9800	TOXIC EFFECT OF ETHYL ALCOHOL
	9801	TOXIC EFFECT OF METHYL ALCOHOL
	9802	TOXIC EFFECT ISOPROPYL ALCOHOL
	9803	TOXIC EFFECT OF FUSEL OIL
	9808	TOXIC EFFECT OTH SPEC ALCOHOLS
	9809	TOXIC EFFECT OF UNSPEC ALCOHOL
	981	TOXIC EFFECT PETROLEUM PRODUCTS
	9820	TOXIC EFFECT BENZENE/HOMOLOGUES
	9821	TOX EFFECT CARBON TETRACHLORIDE
	9822	TOXIC EFFECT CARBON DISULFIDE
	9823	TOX EFF OTH CHLORIN HYDROCARBON
	9824	TOXIC EFFECT OF NITROGLYCOL
	9828	TOXIC EFFECT OF OTHER SOLVENTS
	9830	TOXIC EFFECT CORROSIVE AROMATIC
	9831	TOXIC EFFECT OF ACIDS
	9832	TOXIC EFFECT OF CAUSTIC ALKALIS
	9839	TOXIC EFFECT OF CAUSTIC UNSPEC
	9840	TOX EFF INORGANIC LEAD COMPOUND
	9841	TOX EFF ORGANIC LEAD COMPOUNDS
	9848	TOXIC EFFECT OTH LEAD COMPOUND
	9849	TOX EFFECT UNSPEC LEAD COMPOUND
	9850	TOXIC EFFECT MERCURY/COMPOUNDS
	9851	TOXIC EFFECT ARSENIC/COMPOUNDS
	9852	TOXIC EFFECT MANGANESE/COMPOUND
	9853	TOXIC EFFECT BERYLLIUM/COMPOUND
	9854	TOXIC EFFECT ANTIMONY/COMPOUNDS
	9855	TOXIC EFFECT CADMIUM/COMPOUNDS
	9856	TOXIC EFFECT OF CHROMIUM
	9858	TOXIC EFFECT OTHER SPEC METALS
	9859	TOXIC EFFECT OF UNSPEC METAL
	986	TOXIC EFFECT OF CARBON MONOXIDE
	9870	TOX EFF LIQUEFIED PETROLEUM GAS
	9871	TOX EFFECT OTH HYDROCARBON GAS
	9872	TOXIC EFFECT OF NITROGEN OXIDES
	9873	TOXIC EFFECT OF SULPHUR DIOXIDE
	9874	TOXIC EFFECT OF FREON
	9875	TOXIC EFFECT LACRIMOGENIC GAS
	9876	TOXIC EFFECT OF CHLORINE GAS
	9877	TOX EFFECT HYDROCYANIC ACID GAS
	9878	TOX EFFECT OTH GASES/FUMES/VAPR

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
1015-1016 DIAG INV & MANAGEMENT POISONING		
	9879	TOXIC EFFECT GAS/FUME/VAPOR NOS
	9880	TOXIC EFFECT OF FISH/SHELLFISH
	9881	TOXIC EFFECT OF MUSHROOMS
	9882	TOXIC EFFECT BERRIES/OTH PLANTS
	9888	TOXIC EFFECT OTHER SPEC FOODS
	9889	TOXIC EFFECT UNSPECIFIED FOOD
	9890	TOX EFF HYDROCYAN ACID/CYANIDES
	9891	TOXIC EFFECT STRYCHNINE/SALTS
	9892	TOX EFF CHLORINATED HYDROCARBON
	9893	TOX EFF ORGANOPHOS/CARBAMATE
	9894	TOXIC EFFECT OTH PESTICIDES NEC
	9895	TOXIC EFFECT OF VENOM
	9896	TOXIC EFFECT OF SOAPS/DETERGENT
	9897	TOX EFF AFLATOXIN/OTH MYCOTOXIN
	98981	TOXIC EFFECT OF ASBESTOS
	98982	TOXIC EFFECT OF LATEX
	98983	TOXIC EFFECT OF SILICONE
	98984	TOXIC EFFECT OF TOBACCO
	98989	TOXIC EFFECT OF OTHER SUBSTANCE
	9899	TOXIC EFFECT UNSPEC SUBSTANCE
	9952	ADVERSE EFF DRUG/MEDIC/BIOL NOS
	9954	SHOCK DUE TO ANESTHESIA

ACCS CELL
1017 Amputation Except Fingers/Toes

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
1017 AMPUTATION EXCEPT FINGERS/TOES		
	8870	TRAUM AMP UNIL BLW ELB NO COMPL
	8871	TRAUM AMP UNIL BLW ELB W COMPL
	8872	TR AMP UNIL AT/ABV ELB NO COMPL
	8873	TR AMP UNIL AT/ABV ELB W COMPL
	8874	TRAUM AMP UNIL ARM NOS NO COMPL
	8875	TRAUM AMP UNIL ARM NOS W COMPL
	8876	TRAUM AMPUT BILAT ARM NO COMPL
	8877	TRAUM AMPUT BILAT ARM W COMPL
	8960	TRAUM AMPUT UNIL FOOT NO COMPL
	8961	TRAUM AMPUT UNILAT FOOT W COMPL
	8962	TRAUM AMPUT BILAT FOOT NO COMPL
	8963	TRAUM AMPUT BILAT FOOT W COMPL
	8970	TR AMPUT UNIL BLW KNEE NO COMPL
	8971	TR AMPUT UNIL BLW KNEE W COMPL
	8972	TR AMP UNI AT/ABV KNEE NO COMPL
	8973	TR AMP UNIL AT/ABV KNEE W COMPL
	8974	TR AMPUT UNIL LEG NOS NO COMPL
	8975	TR AMPUT UNILAT LEG NOS W COMPL
	8976	TRAUM AMPUT BILAT LEG NO COMPL
	8977	TRAUM AMPUT BILAT LEG W COMPL

ACCS CELL
1018 Abuse/Sexual Assault

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
1018- 1019 ABUSE/SEXUAL ASSAULT		
	99550	CHILD ABUSE, UNSPECIFIED
	99551	CHILD EMOTIONAL/PSYCHOLOCIAL ABUSE
	99552	CHILD NEGLECT (NUTRITIONAL)
	99553	CHILD SEXUAL ABUSE
	99554	CHILD PHYSICAL ABUSE
	99555	SHAKEN INFANT SYNDROME
	99559	OTHER CHILD ABUSE AND NEGLECT
	99580	ADULT MALTREATMENT, UNSPECIFIED
	99581	ADULT MALTREATMENT SYNDROME
	99582	ADULT EMOTIONAL/PSYCHOLOGICAL ABUSE
	99583	ADULT SEXUAL ABUSE
	99584	ADULT NEGLECT (NUTRITIONAL)
	99585	OTHER ADULT ABUSE AND NEGLECT
	V715	OBSERV FOLL ALLEGED RAPE/SEDUCT

ACCS CELL
1019-1020 Burn Moderate To Severe

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
1020 BURN MODERATE TO SEVERE		
	94130	BURN FACE/HEAD NOS 3RD DGR NOS
	94131	BURN OF EAR THIRD DEGREE NOS
	94132	BURN OF EYE THIRD DEGREE NOS
	94133	BURN OF LIP(S) THIRD DEGREE NOS
	94134	BURN OF CHIN THIRD DEGREE NOS
	94135	BURN OF NOSE THIRD DEGREE NOS
	94136	BURN OF SCALP THIRD DEGREE NOS
	94137	BURN FOREHEAD/CHEEK 3RD DGR NOS
	94138	BURN OF NECK THIRD DEGREE NOS
	94139	BURN MULT FACE/HEAD 3RD DGR NOS
	94140	BURN FACE/HEAD NOS DEEP 3RD DGR
	94141	BURN OF EAR DEEP THIRD DEGREE
	94142	BURN OF EYE DEEP THIRD DEGREE
	94143	BURN LIP(S) DEEP THIRD DEGREE
	94144	BURN OF CHIN DEEP THIRD DEGREE
	94145	BURN OF NOSE DEEP THIRD DEGREE
	94146	BURN OF SCALP DEEP THIRD DEGREE
	94147	BURN FOREHD/CHEEK DEEP 3RD DGR
	94148	BURN OF NECK DEEP THIRD DEGREE
	94149	BURN MULT FAC/HEAD DEEP 3RD DGR
	94150	BURN FAC/HD NOS DEEP 3RD W LOSS
	94151	BURN EAR DEEP 3RD DEGREE W LOSS
	94152	BURN EYE DEEP 3RD DEGREE W LOSS
	94153	BURN LIP(S) DEEP 3RD DGR W LOSS
	94154	BURN CHIN DEEP 3RD DGR W LOSS
	94155	BURN NOSE DEEP 3RD DGR W LOSS
	94156	BURN SCALP DEEP 3RD DGR W LOSS
	94157	BURN FOREHD DEEP 3RD DGR W LOSS
	94158	BURN NECK DEEP 3RD DGR W LOSS
	94159	BURN MULT HD DEEP 3RD DGR W LOS
	94230	BURN TRUNK NOS THIRD DEGREE NOS
	94231	BURN OF BREAST THIRD DEGREE NOS
	94232	BURN CHEST WALL 3RD DEGREE NOS
	94233	BURN ABDOMINAL WALL 3RD DGR NOS
	94234	BURN OF BACK THIRD DEGREE NOS
	94235	BURN GENITALIA THIRD DEGREE NOS
	94239	BURN OTH/MULT TRUNK 3RD DGR NOS
	94240	BURN TRUNK NOS DEEP 3RD DEGREE
	94241	BURN OF BREAST DEEP 3RD DEGREE
	94242	BURN CHEST WALL DEEP 3RD DEGREE
	94243	BURN ABD WALL DEEP THIRD DEGREE
	94244	BURN OF BACK DEEP THIRD DEGREE
	94245	BURN GENITALIA DEEP 3RD DEGREE
	94249	BURN OTH/MLT TRUNK DEEP 3RD DGR
	94250	BURN TRUNK NOS DEEP 3RD W LOSS
	94251	BURN BREAST DEEP 3RD DGR W LOSS
	94252	BURN CHEST WALL DEEP 3RD W LOSS
	94253	BURN ABD WALL DEEP 3RD W LOSS
	94254	BURN BACK DEEP 3RD DGR W LOSS
	94255	BURN GENITALIA DEEP 3RD W LOSS
	94259	BURN OTH TRUNK DEEP 3RD W LOSS
	94340	BURN UPP LIMB NOS DEEP 3RD DGR

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
1020 BURN MODERATE TO SEVERE		
	94341	BURN FOREARM DEEP THIRD DEGREE
	94342	BURN OF ELBOW DEEP THIRD DEGREE
	94343	BURN UPPER ARM DEEP 3RD DEGREE
	94344	BURN OF AXILLA DEEP 3RD DEGREE
	94345	BURN SHOULDER DEEP THIRD DEGREE
	94346	BURN SCAPULAR REG DEEP 3RD DGR
	94349	BURN MULT UPP LIMB DEEP 3RD DGR
	94350	BURN ARM NOS DEEP 3RD WITH LOSS
	94351	BURN FOREARM DEEP 3RD WITH LOSS
	94352	BURN ELBOW DEEP 3RD DGR W LOSS
	94353	BURN UPPER ARM DEEP 3RD W LOSS
	94354	BURN AXILLA DEEP 3RD DGR W LOSS
	94355	BURN SHOULD DEEP 3RD DGR W LOSS
	94356	BURN SCAP REG DEEP 3RD W LOSS
	94359	BURN MULT ARM DEEP 3RD W LOSS
	94440	BURN HAND NOS DEEP THIRD DEGREE
	94441	BURN ONE FINGER DEEP 3RD DEGREE
	94442	BURN OF THUMB DEEP THIRD DEGREE
	94443	BURN MULT FINGERS DEEP 3RD DGR
	94444	BURN MULT FING/THM DEEP 3RD DGR
	94445	BURN OF PALM DEEP THIRD DEGREE
	94446	BURN BACK HAND DEEP 3RD DEGREE
	94447	BURN OF WRIST DEEP THIRD DEGREE
	94448	BURN MULT WRST/HND DEEP 3RD DGR
	94450	BURN HAND NOS DEEP THIRD W LOSS
	94451	BURN ONE FINGER DEEP 3RD W LOSS
	94452	BURN THUMB DEEP 3RD DGR W LOSS
	94453	BURN MULT FING DEEP 3RD W LOSS
	94454	BURN MULT FIN/TH DEEP 3RD W LOS
	94455	BURN PALM DEEP THIRD DGR W LOSS
	94456	BURN BACK HAND DEEP 3RD W LOSS
	94457	BURN WRIST DEEP 3RD DGR W LOSS
	94458	BURN MULT WR/HND DEEP 3RD W LOS
	94540	BURN LOW LIMB NOS DEEP 3RD DGR
	94541	BURN TOE(S) DEEP THIRD DEGREE
	94542	BURN OF FOOT DEEP THIRD DEGREE
	94543	BURN OF ANKLE DEEP THIRD DEGREE
	94544	BURN LOWER LEG DEEP 3RD DEGREE
	94545	BURN OF KNEE DEEP THIRD DEGREE
	94546	BURN OF THIGH DEEP THIRD DEGREE
	94549	BURN MULT LOW LIMB DEEP 3RD DGR
	94550	BURN LEG NOS DEEP 3RD W LOSS
	94551	BURN TOE(S) DEEP 3RD DGR W LOSS
	94552	BURN FOOT DEEP 3RD DGR W LOSS
	94553	BURN ANKLE DEEP 3RD DGR W LOSS
	94554	BURN LOWER LEG DEEP 3RD W LOSS
	94555	BURN KNEE DEEP 3RD DGR W LOSS
	94556	BURN THIGH DEEP 3RD DGR W LOSS
	94559	BURN MULT LEG DEEP 3RD W LOSS
	9462	BURNS OF MULT SITES 2ND DEGREE
	9463	BURNS MULT SITES 3RD DEGREE NOS
	9464	BURN MULT SITES DEEP 3RD DEGREE
	9465	BURN MULT SITES DEEP 3RD W LOSS
	9470	BURN OF MOUTH AND PHARYNX
	9471	BURN OF LARYNX/TRACHEA/LUNG
	9472	BURN OF ESOPHAGUS

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
1020 BURN MODERATE TO SEVERE		
	9473	BURN OF GASTROINTESTINAL TRACT
	9474	BURN OF VAGINA AND UTERUS
	9478	BURN OTHER SPEC INTERNAL ORGANS
	9479	BURN OF UNSPEC INTERNAL ORGAN
	9482	BURN 20-29% BODY/NO 3RD DEGREE
	94820	BURN 20-29% BODY/LESS 10% 3RD
	94821	BURN 20-29% BODY/10-19% 3RD DGR
	94822	BURN 20-29% BODY/20-29% 3RD DGR
	9483	BURN 30-39% BODY/NO 3RD DEGREE
	94830	BURN 30-39% BODY/LESS 10% 3RD
	94831	BURN 30-39% BODY/10-19% 3RD DGR
	94832	BURN 30-39% BODY/20-29% 3RD DGR
	94833	BURN 30-39% BODY/30-39% 3RD DGR
	9484	BURN 40-49% BODY/NO 3RD DEGREE
	94840	BURN 40-49% BODY/LESS 10% 3RD
	94841	BURN 40-49% BODY/10-19% 3RD DGR
	94842	BURN 40-49% BODY/20-29% 3RD DGR
	94843	BURN 40-49% BODY/30-39% 3RD DGR
	94844	BURN 40-49% BODY/40-49% 3RD DGR
	9485	BURN 50-59% BODY/NO 3RD DEGREE
	94850	BURN 50-59% BODY/LESS 10% 3RD
	94851	BURN 50-59% BODY/10-19% 3RD DGR
	94852	BURN 50-59% BODY/20-29% 3RD DGR
	94853	BURN 50-59% BODY/30-39% 3RD DGR
	94854	BURN 50-59% BODY/40-49% 3RD DGR
	94855	BURN 50-59% BODY/50-59% 3RD DGR
	9486	BURN 60-69% BODY/NO 3RD DEGREE
	94860	BURN 60-69% BODY/LESS 10% 3RD
	94861	BURN 60-69% BODY/10-19% 3RD DGR
	94862	BURN 60-69% BODY/20-29% 3RD DGR
	94863	BURN 60-69% BODY/30-39% 3RD DGR
	94864	BURN 60-69% BODY/40-49% 3RD DGR
	94865	BURN 60-69% BODY/50-59% 3RD DGR
	94866	BURN 60-69% BODY/60-69% 3RD DGR
	9487	BURN 70-79% BODY/NO 3RD DEGREE
	94870	BURN 70-79% BODY/LESS 10% 3RD
	94871	BURN 70-79% BODY/10-19% 3RD DGR
	94872	BURN 70-79% BODY/20-29% 3RD DGR
	94873	BURN 70-79% BODY/30-39% 3RD DGR
	94874	BURN 70-79% BODY/40-49% 3RD DGR
	94875	BURN 70-79% BODY/50-59% 3RD DGR
	94876	BURN 70-79% BODY/60-69% 3RD DGR
	94877	BURN 70-79% BODY/70-79% 3RD DGR
	9488	BURN 80-89% BODY/NO 3RD DEGREE
	94880	BURN 80-89% BODY/LESS 10% 3RD
	94881	BURN 80-89% BODY/10-19% 3RD DGR
	94882	BURN 80-89% BODY/20-29% 3RD DGR
	94883	BURN 80-89% BODY/30-39% 3RD DGR
	94884	BURN 80-89% BODY/40-49% 3RD DGR
	94885	BURN 80-89% BODY/50-59% 3RD DGR
	94886	BURN 80-89% BODY/60-69% 3RD DGR
	94887	BURN 80-89% BODY/70-79% 3RD DGR
	94888	BURN 80-89% BODY/80-89% 3RD DGR
	9489	BURN 90-99% BODY/NO 3RD DEGREE
	94890	BURN 90%+ BODY/LESS 10% 3RD DGR
	94891	BURN 90%+ BODY/10-19% 3RD DGR

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
1020 BURN MODERATE TO SEVERE		
	94892	BURN 90%+ BODY/20-29% 3RD DGR
	94893	BURN 90%+ BODY/30-39% 3RD DGR
	94894	BURN 90%+ BODY/40-49% 3RD DGR
	94895	BURN 90%+ BODY/50-59% 3RD DGR
	94896	BURN 90%+ BODY/60-69% 3RD DGR
	94897	BURN 90%+ BODY/70-79% 3RD DGR
	94898	BURN 90%+ BODY/80-89% 3RD DGR
	94899	BURN 90%+ BODY/90%+ 3RD DEGREE
	9492	BURN UNSPECIFIED 2ND DEGREE
	9493	BURN UNSPECIFIED 3RD DEGREE NOS
	9494	BURN UNSPEC DEEP 3RD DEGREE
	9495	BURN NOS DEEP 3RD DEGREE W LOSS
	9910	FROSTBITE OF FACE
	9911	FROSTBITE OF HAND
	9912	FROSTBITE OF FOOT
	9913	FROSTBITE OF OTHER/UNSPEC SITES
	9914	IMMERSION FOOT

ACCS CELL
1021 Minor Other Injuries

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
1021 MINOR OTHER INJURIES		
	9583	POSTTRAUMATIC WOUND INFECT NEC
	9588	OTHER EARLY COMPL OF TRAUMA
	95901	HEAD INJURY, UNSPECIFIED
	95909	INJURY OF FACE AND NECK
	9591	OTHER/UNSPECIFIED INJURY TRUNK
	9592	OTH/UNSPEC INJ SHOULDER/UPP ARM
	9593	OTH/NOS INJ ELBOW/FOREARM/WRIST
	9594	OTH/UNSPEC INJ HAND EXC FINGER
	9595	OTHER/UNSPECIFIED INJURY FINGER
	9596	OTHER/UNSPEC INJURY HIP/THIGH
	9597	OTH/NOS INJ KNEE/LEG/ANKLE/FOOT
	9598	OTH/NOS INJURY OTHER/MULT SITES
	9599	OTHER/UNSPEC INJURY UNSPEC SITE
	9922	HEAT CRAMPS
	9923	HEAT EXHAUSTION ANHYDROTIC
	9924	HEAT EXHAUSTN D/T SALT DEPLETN
	9925	HEAT EXHAUSTION UNSPECIFIED
	9926	HEAT FATIGUE TRANSIENT
	9927	HEAT EDEMA
	9928	OTHER SPECIFIED HEAT EFFECTS
	9929	UNSPECIFIED EFFECT HEAT/LIGHT
	9930	BAROTRAUMA OTITIC
	9931	BAROTRAUMA SINUS
	9932	OTH/UNSPEC EFFECT HIGH ALTITUDE
	9939	UNSPECIFIED EFFECT AIR PRESSURE
	9942	EFFECTS OF HUNGER
	9943	EFFECTS OF THIRST
	9944	EXHAUSTION DUE TO EXPOSURE
	9945	EXHAUSTION D/T EXCESS EXERTION
	9946	MOTION SICKNESS
	99811	HEMORRHAGE COMPLICATING PROCEDURE
	99812	HEMATOMA COMPLICATING PROCEDURE
	99813	SEROMA COMPLICATING PROCEDURE
	9982	ACCIDENT PUNCT/LACN DURING PROC
	9984	FB ACCIDENT LEFT DURING PROC
	99851	INFECTED POSTOPERATIVE SEROMA
	99859	OTHER POSTOPERATIVE INFECTION
	9986	PERSIST POSTOPERATIVE FISTULA
	9987	AC RXN FOREIGN SUBST LEFT PROC
	99883	NON-HEALING SURGICAL WOUND
	99889	OTHER SPEC COMPL PROCEDURES NEC
	9989	UNSPECIFIED COMPL PROCEDURE NEC

ACCS CELL
1022 Moderate Other Injuries

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
1022 MODERATE OTHER INJURIES		
	72761	COMPLETE RUPTURE ROTATOR CUFF
	72762	RUPTURE TENDONS OF BICEPS
	72763	RUPT EXTENSOR TENDON HAND/WRIST
	72764	RUPT FLEXOR TENSONS HAND/WRIST
	72765	RUPTURE QUADRICEPS TENDON
	72766	RUPTURE PATELLAR TENDON
	72767	RUPTURE ACHILLES TENDON
	72768	RUPTURE OTHER TENDON FOOT/ANKLE
	72769	RUPTURE OTH TENDON NONTRAUMATIC
	9050	LATE EFFECT # SKULL/FACE BONES
	9051	LATE EFF # SPINE/TRUNK NO CORD
	9052	LATE EFFECT # UPPER EXTREMITIES
	9053	LATE EFFECT # NECK OF FEMUR
	9054	LATE EFFECT # LOWER EXTREMITIES
	9055	LATE EFFECT # MULT/UNSPEC BONES
	9056	LATE EFFECT OF DISLOCATION
	9057	LATE EFF SPRAIN/STRAIN NO TEND
	9058	LATE EFFECT OF TENDON INJURY
	9059	LATE EFF TRAUMATIC AMPUTATION
	9060	LATE EFF OP WND HEAD/NECK/TRUNK
	9061	LATE EFF OP WND EXTREM NO TEND
	9062	LATE EFFECT SUPERFICIAL INJURY
	9063	LATE EFFECT OF CONTUSION
	9064	LATE EFFECT OF CRUSHING
	9065	LATE EFF BURN EYE/FAC/HEAD/NECK
	9066	LATE EFFECT OF BURN WRIST/HAND
	9067	LATE EFFECT OF BURN OTH EXTREM
	9068	LATE EFFECT BURNS OTH SPEC SITE
	9069	LATE EFFECT OF BURN UNSPEC SITE
	9070	LATE EFFECT INTRACRAN INJ NO #
	9071	LATE EFFECT INJURY CRANIAL NERV
	9072	LATE EFFECT SPINAL CORD INJURY
	9073	LATE EFF NERV RT/PLEXUS TRUNK
	9074	LATE EFF PERIPH NERV SHOULD/ARM
	9075	LATE EFF PERIPH NERV PELVIS/LEG
	9079	LATE EFFECT INJURY OTH/NOS NERV
	9080	LATE EFFECT INTERNAL INJ CHEST
	9081	LATE EFF INT INJ INTRAABD ORGAN
	9082	LATE EFFECT INT INJ OTH INT ORG
	9083	LATE EFF INJ VESS HD/NECK/EXTR
	9084	LATE EFF INJ VESS THOR/ABD/PELV
	9085	LATE EFFECT OF FB IN ORIFICE
	9086	LATE EFFECT CERT COMPL OF TRAUM
	9089	LATE EFFECT UNSPECIFIED INJURY
	9092	LATE EFFECT OF RADIATION
	9093	LATE EFFECT COMPL SURG/MED CARE
	9094	LATE EFFECT CERT OTH EXT CAUSES
	9099	LATE EFFECT OTH/NOS EXT CAUSES
	9530	INJURY TO CERVICAL NERVE ROOT
	9531	INJURY TO DORSAL NERVE ROOT
	9532	INJURY TO LUMBAR NERVE ROOT
	9533	INJURY TO SACRAL NERVE ROOT

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
1022 MODERATE OTHER INJURIES		
	9534	INJURY TO BRACHIAL PLEXUS
	9535	INJURY TO LUMBOSACRAL PLEXUS
	9538	INJURY MULT NERVE ROOTS/PLEXUS
	9539	INJURY UNSPEC NERVE ROOT/PLEXUS
	9540	INJ CERVICAL SYMPATHETIC NERVE
	9541	INJ OTH SYMPATHETIC NERVE TRUNK
	9548	INJURY OTHER SPEC NERVE TRUNK
	9549	INJURY UNSPECIFIED NERVE TRUNK
	9550	INJURY TO AXILLARY NERVE
	9551	INJURY TO MEDIAN NERVE
	9552	INJURY TO ULNAR NERVE
	9553	INJURY TO RADIAL NERVE
	9554	INJURY MUSCULOCUTANEOUS NERVE
	9555	INJ CUTANEOUS SENSORY NERVE ARM
	9556	INJURY TO DIGITAL NERVE
	9557	INJ OTHER SPEC NERVE SHOULD/ARM
	9558	INJ MULTIPLE NERVES SHOULD/ARM
	9559	INJURY UNSPEC NERVE SHOULD/ARM
	9560	INJURY TO SCIATIC NERVE
	9561	INJURY TO FEMORAL NERVE
	9562	INJURY POSTERIOR TIBIAL NERVE
	9563	INJURY TO PERONEAL NERVE
	9564	INJ CUTANEOUS SENSORY NERVE LEG
	9565	INJURY OTH SPEC NERVE PELV/LEG
	9568	INJURY MULTIPLE NERVES PELV/LEG
	9569	INJURY UNSPEC NERVE PELVIS/LEG
	9570	INJURY SUPRFIC NERVES HEAD/NECK
	9571	INJURY OTHER SPECIFIED NERVE(S)
	9578	INJ MULT NERVES SEVERAL PARTS
	9579	INJURY NERVE UNSPECIFIED SITE
	9921	HEAT SYNCOPE
	9938	OTHER SPEC EFFECTS AIR PRESSURE
	9983	DISRUPTION OF OPERATION WOUND
	V713	OBSERV FOLLOWING ACCIDENT WORK
	V714	OBSERV FOLLOWING OTHER ACCIDENT
	V716	OBSERV FOLL OTHER INFLICTED INJ

ACCS CELL
1024 Comas

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
1024 COMAS		
	2510	HYPOGLYCEMIC COMA
	5722	HEPATIC COMA
	78001	COMA

ACCS CELL
1025 Shock

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
1025 SHOCK		
	63450	SPONT ABORT W SHOCK/UNSPECIFIED
	63451	SPONT ABORT W SHOCK/INCOMPLETE
	63452	SPONT ABORTION W SHOCK/COMPLETE
	63550	LEGAL ABORT W SHOCK/UNSPECIFIED
	63551	LEGAL ABORT W SHOCK/INCOMPLETE
	63552	LEGAL ABORTION W SHOCK/COMPLETE
	63650	ILLEG ABORT W SHOCK/UNSPECIFIED
	63651	ILLEG ABORT W SHOCK/INCOMPLETE
	63652	ILLEG ABORTION W SHOCK/COMPLETE
	63750	ABORT NOS W SHOCK/UNSPECIFIED
	63751	ABORT NOS W SHOCK/INCOMPLETE
	63752	ABORTION NOS W SHOCK/COMPLETE
	6395	SHOCK AFT ABORTION/ECTOPIC PREG
	66910	SHOCK DUR LABOR/DELIVERY/UNSPEC
	66911	SHOCK DUR LABOR/DELIVERY/DELIV
	66912	SHOCK LABOR/DELIV/DELIV W COMPL
	66913	SHOCK DUR LABOR/DELIV/ANTEPART
	66914	SHOCK DUR LABOR/DELIV/POSTPART
	78550	SHOCK UNSPECIFIED
	78559	OTHER SHOCK NO MENTION TRAUMA
	9584	TRAUMATIC SHOCK
	9585	TRAUMATIC ANURIA
	9950	ANAPHYLACTIC SHOCK
	99560	ANAPHYLACTIC SHOCK D/T UNS FOOD
	99561	ANAPHYLACTIC SHOCK D/T PEANUTS
	99562	ANAPHYLACT SHOCK D/T CRUSTACEAN
	99563	ANAPHYLACT SHOCK D/T FRUIT/VEG
	99564	ANAPHYLACT SHOCK D/T NUTS/SEEDS
	99565	ANAPHYLACTIC SHOCK D/T FISH
	99566	ANAPHYLACTIC SHOCK D/T FOOD ADD
	99567	ANAPHYLACT SHOCK D/T MILK PROD
	99568	ANAPHYLACTIC SHOCK D/T EGGS
	99569	ANAPHYL SHOCK D/T OTH SPEC FOOD
	9980	POSTOPERATIVE SHOCK
	9994	ANAPHYLACTIC SHOCK DUE TO SERUM
	9995	OTHER SERUM REACTION

ACCS CELL
1026 Open Spinal Fracture & Dislocation

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
1026 OPEN SPINAL FRACTURE AND DISLOCATION		
	80510	OP # CERV VERT NOS NO CORD INJ
	80511	OP # 1ST CERV VERT NO CORD INJ
	80512	OP # 2ND CERV VERT NO CORD INJ
	80513	OP # 3RD CERV VERT NO CORD INJ
	80514	OP # 4TH CERV VERT NO CORD INJ
	80515	OP # 5TH CERV VERT NO CORD INJ
	80516	OP # 6TH CERV VERT NO CORD INJ
	80517	OP # 7TH CERV VERT NO CORD INJ
	80518	OP # MULT CERV VERT NO CORD INJ
	8053	DORSAL VERT # OP NO CORD INJURY
	8055	LUMBAR VERT # OP NO CORD INJURY
	8057	SACRUM/COCCYX # OP NO CORD INJ
	8059	UNSPEC VERT # OP NO CORD INJURY
	80610	OP # C1-C4 W UNSPEC CORD INJURY
	80611	OP # C1-C4 W COMPLETE LES CORD
	80612	OP # C1-C4 W ANT CORD SYNDROME
	80613	OP # C1-C4 W CENTRAL CORD SYND
	80614	OP # C1-C4 W OTH SPEC CORD INJ
	80615	OP # C5-C7 W UNSPEC CORD INJURY
	80616	OP # C5-C7 W COMPLETE LES CORD
	80617	OP # C5-C7 W ANT CORD SYNDROME
	80618	OP # C5-C7 W CENTRAL CORD SYND
	80619	OP # C5-C7 W OTH SPEC CORD INJ
	80630	OP # T1-T6 W UNSPEC CORD INJURY
	80631	OP # T1-T6 W COMPLETE LES CORD
	80632	OP # T1-T6 W ANT CORD SYNDROME
	80633	OP # T1-T6 W CENTRAL CORD SYND
	80634	OP # T1-T6 W OTH SPEC CORD INJ
	80635	OP # T7-T12 W UNSPEC CORD INJ
	80636	OP # T7-T12 W COMPLETE LES CORD
	80637	OP # T7-T12 W ANT CORD SYNDROME
	80638	OP # T7-T12 W CENTRAL CORD SYND
	80639	OP # T7-T12 W OTH SPEC CORD INJ
	8065	LUMBAR VERT # OP W CORD INJURY
	8069	UNSPEC VERT # OP W CORD INJURY
	83910	OP DISLOCATION CERV VERT UNSPEC
	83911	OP DISLOCATION FIRST CERV VERT
	83912	OP DISLOCATION SECOND CERV VERT
	83913	OP DISLOCATION THIRD CERV VERT
	83914	OP DISLOCATION FOURTH CERV VERT
	83915	OP DISLOCATION FIFTH CERV VERT
	83916	OP DISLOCATION SIXTH CERV VERT
	83917	OP DISLOCATN SEVENTH CERV VERT
	83918	OPEN DISLOCATION MULT CERV VERT
	83930	OPEN DISLOCATION LUMBAR VERT
	83931	OPEN DISLOCATION THORACIC VERT
	83950	OPEN DISLOCATION VERTEBRA NOS
	83951	OPEN DISLOCATION OF COCCYX
	83952	OPEN DISLOCATION OF SACRUM
	83959	OPEN DISLOCATION OTH VERTEBRA

ACCS CELL
1027 Closed Spinal Fracture & Dislocation

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
1027 CLOSED SPINAL FRACTURE AND DISLOCATION		
	80500	CL # CERV VERT NOS NO CORD INJ
	80501	CL # 1ST CERV VERT NO CORD INJ
	80502	CL # 2ND CERV VERT NO CORD INJ
	80503	CL # 3RD CERV VERT NO CORD INJ
	80504	CL # 4TH CERV VERT NO CORD INJ
	80505	CL # 5TH CERV VERT NO CORD INJ
	80506	CL # 6TH CERV VERT NO CORD INJ
	80507	CL # 7TH CERV VERT NO CORD INJ
	80508	CL # MULT CERV VERT NO CORD INJ
	8052	DORSAL VERT # CL NO CORD INJURY
	8054	LUMBAR VERT # CL NO CORD INJURY
	8056	SACRUM/COCCYX # CL NO CORD INJ
	8058	UNSPEC VERT # CL NO CORD INJURY
	80600	CL # C1-C4 W UNSPEC CORD INJURY
	80601	CL # C1-C4 W COMPLETE LES CORD
	80602	CL # C1-C4 W ANT CORD SYNDROME
	80603	CL # C1-C4 W CENTRAL CORD SYND
	80604	CL # C1-C4 W OTH SPEC CORD INJ
	80605	CL # C5-C7 W UNSPEC CORD INJURY
	80606	CL # C5-C7 W COMPLETE LES CORD
	80607	CL # C5-C7 W ANT CORD SYNDROME
	80608	CL # C5-C7 W CENTRAL CORD SYND
	80609	CL # C5-C7 W OTH SPEC CORD INJ
	80620	CL # T1-T6 W UNSPEC CORD INJURY
	80621	CL # T1-T6 W COMPLETE LES CORD
	80622	CL # T1-T6 W ANT CORD SYNDROME
	80623	CL # T1-T6 W CENTRAL CORD SYND
	80624	CL # T1-T6 W OTH SPEC CORD INJ
	80625	CL # T7-T12 W UNSPEC CORD INJ
	80626	CL # T7-T12 W COMPLETE LES CORD
	80627	CL # T7-T12 W ANT CORD SYNDROME
	80628	CL # T7-T12 W CENTRAL CORD SYND
	80629	CL # T7-T12 W OTH SPEC CORD INJ
	8064	LUMBAR VERT # CL W CORD INJURY
	80660	CL # SACRUM/COCCYX CORD INJ NOS
	80661	CL # SAC/COC COMPL CAUDA EQUINA
	80662	CL # SAC/COC OTHER CAUDA EQUINA
	80669	CL # SACRUM/COCCYX OTH CORD INJ
	80670	OP # SACRUM/COCCYX CORD INJ NOS
	80671	OP # SAC/COC COMPL CAUDA EQUINA
	80672	OP # SAC/COC OTHER CAUDA EQUINA
	80679	OP # SACRUM/COCCYX OTH CORD INJ
	8068	UNSPEC VERT # CL W CORD INJURY
	83900	CL DISLOCATION CERV VERT UNSPEC
	83901	CL DISLOCATION FIRST CERV VERT
	83902	CL DISLOCATION SECOND CERV VERT
	83903	CL DISLOCATION THIRD CERV VERT
	83904	CL DISLOCATION FOURTH CERV VERT
	83905	CL DISLOCATION FIFTH CERV VERT
	83906	CL DISLOCATION SIXTH CERV VERT
	83907	CL DISLOCATN SEVENTH CERV VERT
	83908	CL DISLOCATION MULT CERV VERT

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
1027 CLOSED SPINAL FRACTURE AND DISLOCATION		
	83920	CLOSED DISLOCATION LUMBAR VERT
	83921	CLOSED DISLOCATN THORACIC VERT
	83940	CLOSED DISLOCATION VERTEBRA NOS
	83941	CLOSED DISLOCATION OF COCCYX
	83942	CLOSED DISLOCATION OF SACRUM
	83949	CLOSED DISLOCATION OTH VERTEBRA

ACCS CELL
1028-1029 Head Injury

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
1028-1029 DIAG INV & MANAGEMENT HEAD INJURY		
	80000	CL # VAULT SKULL NO INTRACR NOS
	80001	CL# VAULT SKULL NO INTRACR/COMA
	80002	CL# VLT SKL NO INTRACR BRF COMA
	80003	CL# VLT SKL NO INTRACR MOD COMA
	80004	CL# VLT SKL NO INTRCR PROL COMA
	80005	CL# VLT SKL NO INTRCR DEEP COMA
	80006	CL# VLT SKL NO INTRACR COMA NOS
	80009	CL# VLT SKL NO INTRACR W CONCUS
	80010	CL # VAULT SKULL CEREB LACN NOS
	80011	CL # VLT SKL CEREB LACN/NO COMA
	80012	CL# VLT SKL CEREB LACN BRF COMA
	80013	CL# VLT SKL CEREB LACN MOD COMA
	80014	CL # VLT SKL CER LACN PROL COMA
	80015	CL # VLT SKL CER LACN DEEP COMA
	80016	CL# VLT SKL CEREB LACN COMA NOS
	80019	CL# VLT SKL CEREB LACN W CONCUS
	80020	CL # VAULT SKULL DURAL HEM NOS
	80021	CL# VLT SKULL DURAL HEM/NO COMA
	80022	CL # VLT SKL DURAL HEM BRF COMA
	80023	CL # VLT SKL DURAL HEM MOD COMA
	80024	CL# VLT SKL DURAL HEM PROL COMA
	80025	CL# VLT SKL DURAL HEM DEEP COMA
	80026	CL # VLT SKL DURAL HEM COMA NOS
	80029	CL # VLT SKL DURAL HEM W CONCUS
	80030	CL # VAULT SKULL WITH HEM NOS
	80031	CL# VLT SKULL W HEM NOS/NO COMA
	80032	CL # VLT SKL W HEM NOS BRF COMA
	80033	CL # VLT SKL W HEM NOS MOD COMA
	80034	CL# VLT SKL W HEM NOS PROL COMA
	80035	CL# VLT SKL W HEM NOS DEEP COMA
	80036	CL # VLT SKL W HEM NOS COMA NOS
	80039	CL # VLT SKL W HEM NOS W CONCUS
	80040	CL # VAULT SKULL W INTRACR NOS
	80041	CL# VAULT SKL W INTRACR NO COMA
	80042	CL # VLT SKL W INTRACR BRF COMA
	80043	CL # VLT SKL W INTRACR MOD COMA
	80044	CL# VLT SKL W INTRACR PROL COMA
	80045	CL# VLT SKL W INTRACR DEEP COMA
	80046	CL # VLT SKL W INTRACR COMA NOS
	80049	CL # VLT SKL W INTRACR W CONCUS
	80050	OP # VAULT SKULL NO INTRACR NOS

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
1028-1029 DIAG INV & MANAGEMENT HEAD INJURY		
	80051	OP# VAULT SKULL NO INTRACR/COMA
	80052	OP# VLT SKL NO INTRACR BRF COMA
	80053	OP# VLT SKL NO INTRACR MOD COMA
	80054	OP# VLT SKL NO INTRCR PROL COMA
	80055	OP# VLT SKL NO INTRCR DEEP COMA
	80056	OP# VLT SKL NO INTRACR COMA NOS
	80059	OP# VLT SKL NO INTRACR W CONCUS
	80060	OP # VAULT SKULL CEREB LACN NOS
	80061	OP # VLT SKL CEREB LACN/NO COMA
	80062	OP# VLT SKL CEREB LACN BRF COMA
	80063	OP# VLT SKL CEREB LACN MOD COMA
	80064	OP # VLT SKL CER LACN PROL COMA
	80065	OP # VLT SKL CER LACN DEEP COMA
	80066	OP# VLT SKL CEREB LACN COMA NOS
	80069	OP# VLT SKL CEREB LACN W CONCUS
	80070	OP # VAULT SKULL DURAL HEM NOS
	80071	OP# VLT SKULL DURAL HEM/NO COMA
	80072	OP # VLT SKL DURAL HEM BRF COMA
	80073	OP # VLT SKL DURAL HEM MOD COMA
	80074	OP# VLT SKL DURAL HEM PROL COMA
	80075	OP# VLT SKL DURAL HEM DEEP COMA
	80076	OP # VLT SKL DURAL HEM COMA NOS
	80079	OP # VLT SKL DURAL HEM W CONCUS
	80080	OPEN # VAULT SKULL WITH HEM NOS
	80081	OP# VLT SKULL W HEM NOS/NO COMA
	80082	OP # VLT SKL W HEM NOS BRF COMA
	80083	OP # VLT SKL W HEM NOS MOD COMA
	80084	OP# VLT SKL W HEM NOS PROL COMA
	80085	OP# VLT SKL W HEM NOS DEEP COMA
	80086	OP # VLT SKL W HEM NOS COMA NOS
	80089	OP # VLT SKL W HEM NOS W CONCUS
	80090	OP # VAULT SKULL W INTRACR NOS
	80091	OP# VAULT SKL W INTRACR NO COMA
	80092	OP # VLT SKL W INTRACR BRF COMA
	80093	OP # VLT SKL W INTRACR MOD COMA
	80094	OP# VLT SKL W INTRACR PROL COMA
	80095	OP# VLT SKL W INTRACR DEEP COMA
	80096	OP # VLT SKL W INTRACR COMA NOS
	80099	OP # VLT SKL W INTRACR W CONCUS
	80100	CL # BASE SKULL NO INTRACR NOS
	80101	CL # BASE SKULL NO INTRACR/COMA
	80102	CL# BAS SKL NO INTRACR BRF COMA
	80103	CL# BAS SKL NO INTRACR MOD COMA
	80104	CL# BAS SKL NO INTRCR PROL COMA
	80105	CL# BAS SKL NO INTRCR DEEP COMA
	80106	CL# BAS SKL NO INTRACR COMA NOS
	80109	CL# BAS SKL NO INTRACR W CONCUS
	80110	CL # BASE SKULL CEREB LACN NOS
	80111	CL # BAS SKL CEREB LACN/NO COMA
	80112	CL# BAS SKL CEREB LACN BRF COMA
	80113	CL# BAS SKL CEREB LACN MOD COMA
	80114	CL # BAS SKL CER LACN PROL COMA
	80115	CL # BAS SKL CER LACN DEEP COMA
	80116	CL# BAS SKL CEREB LACN COMA NOS
	80119	CL# BAS SKL CEREB LACN W CONCUS
	80120	CL # BASE SKULL DURAL HEM NOS

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
1028-1029 DIAG INV & MANAGEMENT HEAD INJURY		
	80121	CL# BAS SKULL DURAL HEM/NO COMA
	80122	CL # BAS SKL DURAL HEM BRF COMA
	80123	CL # BAS SKL DURAL HEM MOD COMA
	80124	CL# BAS SKL DURAL HEM PROL COMA
	80125	CL# BAS SKL DURAL HEM DEEP COMA
	80126	CL # BAS SKL DURAL HEM COMA NOS
	80129	CL # BAS SKL DURAL HEM W CONCUS
	80130	CL # BASE SKULL WITH HEM NOS
	80131	CL# BAS SKULL W HEM NOS/NO COMA
	80132	CL # BAS SKL W HEM NOS BRF COMA
	80133	CL # BAS SKL W HEM NOS MOD COMA
	80134	CL# BAS SKL W HEM NOS PROL COMA
	80135	CL# BAS SKL W HEM NOS DEEP COMA
	80136	CL # BAS SKL W HEM NOS COMA NOS
	80139	CL # BAS SKL W HEM NOS W CONCUS
	80140	CL # BASE SKULL W INTRACR NOS
	80141	CL# BAS SKULL W INTRACR NO COMA
	80142	CL # BAS SKL W INTRACR BRF COMA
	80143	CL # BAS SKL W INTRACR MOD COMA
	80144	CL# BAS SKL W INTRACR PROL COMA
	80145	CL# BAS SKL W INTRACR DEEP COMA
	80146	CL # BAS SKL W INTRACR COMA NOS
	80149	CL # BAS SKL W INTRACR W CONCUS
	80150	OP # BASE SKULL NO INTRACR NOS
	80151	OP # BASE SKULL NO INTRACR/COMA
	80152	OP# BAS SKL NO INTRACR BRF COMA
	80153	OP# BAS SKL NO INTRACR MOD COMA
	80154	OP# BAS SKL NO INTRCR PROL COMA
	80155	OP# BAS SKL NO INTRCR DEEP COMA
	80156	OP# BAS SKL NO INTRACR COMA NOS
	80159	OP# BAS SKL NO INTRACR W CONCUS
	80160	OP # BASE SKULL CEREB LACN NOS
	80161	OP # BAS SKL CEREB LACN/NO COMA
	80162	OP# BAS SKL CEREB LACN BRF COMA
	80163	OP# BAS SKL CEREB LACN MOD COMA
	80164	OP # BAS SKL CER LACN PROL COMA
	80165	OP # BAS SKL CER LACN DEEP COMA
	80166	OP# BAS SKL CEREB LACN COMA NOS
	80169	OP# BAS SKL CEREB LACN W CONCUS
	80170	OP # BASE SKULL DURAL HEM NOS
	80171	OP# BAS SKULL DURAL HEM/NO COMA
	80172	OP # BAS SKL DURAL HEM BRF COMA
	80173	OP # BAS SKL DURAL HEM MOD COMA
	80174	OP# BAS SKL DURAL HEM PROL COMA
	80175	OP# BAS SKL DURAL HEM DEEP COMA
	80176	OP # BAS SKL DURAL HEM COMA NOS
	80179	OP # BAS SKL DURAL HEM W CONCUS
	80180	OPEN # BASE SKULL WITH HEM NOS
	80181	OP# BAS SKULL W HEM NOS/NO COMA
	80182	OP # BAS SKL W HEM NOS BRF COMA
	80183	OP # BAS SKL W HEM NOS MOD COMA
	80184	OP# BAS SKL W HEM NOS PROL COMA
	80185	OP# BAS SKL W HEM NOS DEEP COMA
	80186	OP # BAS SKL W HEM NOS COMA NOS
	80189	OP # BAS SKL W HEM NOS W CONCUS
	80190	OP # BASE SKULL W INTRACR NOS

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
1028-1029 DIAG INV & MANAGEMENT HEAD INJURY		
	80191	OP # BASE SKL W INTRACR NO COMA
	80192	OP # BAS SKL W INTRACR BRF COMA
	80193	OP # BAS SKL W INTRACR MOD COMA
	80194	OP# BAS SKL W INTRACR PROL COMA
	80195	OP# BAS SKL W INTRACR DEEP COMA
	80196	OP # BAS SKL W INTRACR COMA NOS
	80199	OP # BAS SKL W INTRACR W CONCUS
	80300	OTHER CL # SKULL NO INTRACR NOS
	80301	OTHER CL# SKULL NO INTRACR/COMA
	80302	OTH CL# SKL NO INTRACR BRF COMA
	80303	OTH CL# SKL NO INTRACR MOD COMA
	80304	OTH CL# SKL NO INTRCR PROL COMA
	80305	OTH CL# SKL NO INTRCR DEEP COMA
	80306	OTH CL# SKL NO INTRACR COMA NOS
	80309	OTH CL# SKL NO INTRACR W CONCUS
	80310	OTHER CL # SKULL CEREB LACN NOS
	80311	OTH CL # SKL CEREB LACN/NO COMA
	80312	OTH CL# SKL CEREB LACN BRF COMA
	80313	OTH CL# SKL CEREB LACN MOD COMA
	80314	OTH CL # SKL CER LACN PROL COMA
	80315	OTH CL # SKL CER LACN DEEP COMA
	80316	OTH CL# SKL CEREB LACN COMA NOS
	80319	OTH CL# SKL CEREB LACN W CONCUS
	80320	OTHER CL # SKULL DURAL HEM NOS
	80321	OTH CL# SKULL DURAL HEM/NO COMA
	80322	OTH CL # SKL DURAL HEM BRF COMA
	80323	OTH CL # SKL DURAL HEM MOD COMA
	80324	OTH CL# SKL DURAL HEM PROL COMA
	80325	OTH CL# SKL DURAL HEM DEEP COMA
	80326	OTH CL # SKL DURAL HEM COMA NOS
	80329	OTH CL # SKL DURAL HEM W CONCUS
	80330	OTHER CL # SKULL WITH HEM NOS
	80331	OTH CL# SKULL W HEM NOS/NO COMA
	80332	OTH CL # SKL W HEM NOS BRF COMA
	80333	OTH CL # SKL W HEM NOS MOD COMA
	80334	OTH CL# SKL W HEM NOS PROL COMA
	80335	OTH CL# SKL W HEM NOS DEEP COMA
	80336	OTH CL # SKL W HEM NOS COMA NOS
	80339	OTH CL # SKL W HEM NOS W CONCUS
	80340	OTHER CL # SKULL W INTRACR NOS
	80341	OTHER CL# SKL W INTRACR NO COMA
	80342	OTH CL # SKL W INTRACR BRF COMA
	80343	OTH CL # SKL W INTRACR MOD COMA
	80344	OTH CL# SKL W INTRACR PROL COMA
	80345	OTH CL# SKL W INTRACR DEEP COMA
	80346	OTH CL # SKL W INTRACR COMA NOS
	80349	OTH CL # SKL W INTRACR W CONCUS
	80350	OTHER OP # SKULL NO INTRACR NOS
	80351	OTHER OP# SKULL NO INTRACR/COMA
	80352	OTH OP# SKL NO INTRACR BRF COMA
	80353	OTH OP# SKL NO INTRACR MOD COMA
	80354	OTH OP# SKL NO INTRCR PROL COMA
	80355	OTH OP# SKL NO INTRCR DEEP COMA
	80356	OTH OP# SKL NO INTRACR COMA NOS
	80359	OTH OP# SKL NO INTRACR W CONCUS
	80360	OTHER OP # SKULL CEREB LACN NOS

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
1028-1029 DIAG INV & MANAGEMENT HEAD INJURY		
	80361	OTH OP # SKL CEREB LACN/NO COMA
	80362	OTH OP# SKL CEREB LACN BRF COMA
	80363	OTH OP# SKL CEREB LACN MOD COMA
	80364	OTH OP # SKL CER LACN PROL COMA
	80365	OTH OP # SKL CER LACN DEEP COMA
	80366	OTH OP# SKL CEREB LACN COMA NOS
	80369	OTH OP# SKL CEREB LACN W CONCUS
	80370	OTHER OP # SKULL DURAL HEM NOS
	80371	OTH OP# SKULL DURAL HEM/NO COMA
	80372	OTH OP # SKL DURAL HEM BRF COMA
	80373	OTH OP # SKL DURAL HEM MOD COMA
	80374	OTH OP# SKL DURAL HEM PROL COMA
	80375	OTH OP# SKL DURAL HEM DEEP COMA
	80376	OTH OP # SKL DURAL HEM COMA NOS
	80379	OTH OP # SKL DURAL HEM W CONCUS
	80380	OTHER OPEN # SKULL WITH HEM NOS
	80381	OTH OP# SKULL W HEM NOS/NO COMA
	80382	OTH OP # SKL W HEM NOS BRF COMA
	80383	OTH OP # SKL W HEM NOS MOD COMA
	80384	OTH OP# SKL W HEM NOS PROL COMA
	80385	OTH OP# SKL W HEM NOS DEEP COMA
	80386	OTH OP # SKL W HEM NOS COMA NOS
	80389	OTH OP # SKL W HEM NOS W CONCUS
	80390	OTHER OP # SKULL W INTRACR NOS
	80391	OTHER OP# SKL W INTRACR NO COMA
	80392	OTH OP # SKL W INTRACR BRF COMA
	80393	OTH OP # SKL W INTRACR MOD COMA
	80394	OTH OP# SKL W INTRACR PROL COMA
	80395	OTH OP# SKL W INTRACR DEEP COMA
	80396	OTH OP # SKL W INTRACR COMA NOS
	80399	OTH OP # SKL W INTRACR W CONCUS
	80400	MULT CL # SKULL NO INTRACR NOS
	80401	MULT CL # SKULL NO INTRACR/COMA
	80402	MULT CL# SKL NO INTRCR BRF COMA
	80403	MULT CL# SKL NO INTRCR MOD COMA
	80404	MULT CL# SKL NO INTRCR PROL COM
	80405	MULT CL# SKL NO INTRCR DEEP COM
	80406	MULT CL# SKL NO INTRCR COMA NOS
	80409	MULT CL# SKL NO INTRCR W CONCUS
	80410	MULT CL # SKULL CEREB LACN NOS
	80411	MULT CL# SKL CEREB LACN/NO COMA
	80412	MULT CL # SKL CER LACN BRF COMA
	80413	MULT CL # SKL CER LACN MOD COMA
	80414	MULT CL# SKL CER LACN PROL COMA
	80415	MULT CL# SKL CER LACN DEEP COMA
	80416	MULT CL # SKL CER LACN COMA NOS
	80419	MULT CL # SKL CER LACN W CONCUS
	80420	MULT CL # SKULL DURAL HEM NOS
	80421	MULT CL # SKL DURAL HEM/NO COMA
	80422	MULT CL# SKL DURAL HEM BRF COMA
	80423	MULT CL# SKL DURAL HEM MOD COMA
	80424	MULT CL# SKL DURAL HEM PROL COM
	80425	MULT CL# SKL DURAL HEM DEEP COM
	80426	MULT CL# SKL DURAL HEM COMA NOS
	80429	MULT CL# SKL DURAL HEM W CONCUS
	80430	MULT CL # SKULL WITH HEM NOS

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
1028-1029 DIAG INV & MANAGEMENT HEAD INJURY		
	80431	MULT CL # SKL W HEM NOS/NO COMA
	80432	MULT CL# SKL W HEM NOS BRF COMA
	80433	MULT CL# SKL W HEM NOS MOD COMA
	80434	MULT CL# SKL W HEM NOS PROL COM
	80435	MULT CL# SKL W HEM NOS DEEP COM
	80436	MULT CL# SKL W HEM NOS COMA NOS
	80439	MULT CL# SKL W HEM NOS W CONCUS
	80440	MULT CL # SKULL W INTRACR NOS
	80441	MULT CL # SKL W INTRACR NO COMA
	80442	MULT CL# SKL W INTRACR BRF COMA
	80443	MULT CL# SKL W INTRACR MOD COMA
	80444	MULT CL# SKL W INTRACR PROL COM
	80445	MULT CL# SKL W INTRACR DEEP COM
	80446	MULT CL# SKL W INTRACR COMA NOS
	80449	MULT CL# SKL W INTRACR W CONCUS
	80450	MULT OP # SKULL NO INTRACR NOS
	80451	MULT OP # SKULL NO INTRACR/COMA
	80452	MULT OP# SKL NO INTRCR BRF COMA
	80453	MULT OP# SKL NO INTRCR MOD COMA
	80454	MULT OP# SKL NO INTRCR PROL COM
	80455	MULT OP# SKL NO INTRCR DEEP COM
	80456	MULT OP# SKL NO INTRCR COMA NOS
	80459	MULT OP# SKL NO INTRCR W CONCUS
	80460	MULT OP # SKULL CEREB LACN NOS
	80461	MULT OP# SKL CEREB LACN/NO COMA
	80462	MULT OP # SKL CER LACN BRF COMA
	80463	MULT OP # SKL CER LACN MOD COMA
	80464	MULT OP# SKL CER LACN PROL COMA
	80465	MULT OP# SKL CER LACN DEEP COMA
	80466	MULT OP # SKL CER LACN COMA NOS
	80469	MULT OP # SKL CER LACN W CONCUS
	80470	MULT OP # SKULL DURAL HEM NOS
	80471	MULT OP # SKL DURAL HEM/NO COMA
	80472	MULT OP# SKL DURAL HEM BRF COMA
	80473	MULT OP# SKL DURAL HEM MOD COMA
	80474	MULT OP# SKL DURAL HEM PROL COM
	80475	MULT OP# SKL DURAL HEM DEEP COM
	80476	MULT OP# SKL DURAL HEM COMA NOS
	80479	MULT OP# SKL DURAL HEM W CONCUS
	80480	MULT OPEN # SKULL WITH HEM NOS
	80481	MULT OP # SKL W HEM NOS/NO COMA
	80482	MULT OP# SKL W HEM NOS BRF COMA
	80483	MULT OP# SKL W HEM NOS MOD COMA
	80484	MULT OP# SKL W HEM NOS PROL COM
	80485	MULT OP# SKL W HEM NOS DEEP COM
	80486	MULT OP# SKL W HEM NOS COMA NOS
	80489	MULT OP# SKL W HEM NOS W CONCUS
	80490	MULT OPEN # SKULL W INTRACR NOS
	80491	MULT OP # SKL W INTRACR NO COMA
	80492	MULT OP# SKL W INTRACR BRF COMA
	80493	MULT OP# SKL W INTRACR MOD COMA
	80494	MULT OP# SKL W INTRCR PROL COMA
	80495	MULT OP# SKL W INTRCR DEEP COMA
	80496	MULT OP# SKL W INTRACR COMA NOS
	80499	MULT OP# SKL W INTRACR W CONCUS
	8500	CONCUSSION NO LOSS CONSCIOUS

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
1028-1029 DIAG INV & MANAGEMENT HEAD INJURY		
	8501	CONCUSSION BRIEF LOSS CONSCIOUS
	8502	CONCUSSION MOD LOSS CONSCIOUS
	8503	CONCUSSION PROL LOSS CONSCIOUS
	8504	CONCUSSION DEEP LOSS CONSCIOUS
	8505	CONCUSSION LOSS CONSCIOUS NOS
	8509	CONCUSSION UNSPECIFIED
	85100	CORTEX CONTUSION NO OP WND NOS
	85101	CORTEX CONTUS NO OP WND/NO COMA
	85102	CORTEX CONTUSION NO OP/BRF COMA
	85103	CORTEX CONTUSION NO OP/MOD COMA
	85104	CORTEX CONTUS NO OP/PROL COMA
	85105	CORTEX CONTUS NO OP/DEEP COMA
	85106	CORTEX CONTUS NO OP WND/COMA NO
	85109	CORTEX CONTUS NO OP W CONCUS NO
	85110	CORTEX CONTUSION W OPEN WND NOS
	85111	CORTEX CONTUS W OP WND/NO COMA
	85112	CORTEX CONTUS W OP WND/BRF COMA
	85113	CORTEX CONTUS W OP WND/MOD COMA
	85114	CORTEX CONTUS OP WND/PROL COMA
	85115	CORTEX CONTUS OP WND/DEEP COMA
	85116	CORTEX CONTUS W OP WND/COMA NOS
	85119	CORTEX CONTUS OP WND/CONCUS NOS
	85120	CORTEX LACN NO OPEN WOUND NOS
	85121	CORTEX LACN NO OPEN WND/NO COMA
	85122	CORTEX LACN NO OP WND/BRF COMA
	85123	CORTEX LACN NO OP WND/MOD COMA
	85124	CORTEX LACN NO OP WND/PROL COMA
	85125	CORTEX LACN NO OP WND/DEEP COMA
	85126	CORTEX LACN NO OP WND/COMA NOS
	85129	CORTEX LACN NO OP WND W CONCUS
	85130	CORTEX LACN WITH OPEN WOUND NOS
	85131	CORTEX LACN W OPEN WND/NO COMA
	85132	CORTEX LACN W OPEN WND/BRF COMA
	85133	CORTEX LACN W OPEN WND/MOD COMA
	85134	CORTEX LACN W OP WND/PROL COMA
	85135	CORTEX LACN W OP WND/DEEP COMA
	85136	CORTEX LACN W OPEN WND/COMA NOS
	85139	CORTEX LACN W OPEN WND W CONCUS
	85140	BR STEM CONTUSION NO OP WND NOS
	85141	BR STEM CONTUS NO OPEN/NO COMA
	85142	BR STEM CONTUS NO OPEN/BRF COMA
	85143	BR STEM CONTUS NO OPEN/MOD COMA
	85144	BR STEM CONTUS NO OP/PROL COMA
	85145	BR STEM CONTUS NO OP/DEEP COMA
	85146	BR STEM CONTUS NO OPEN/COMA NOS
	85149	BR STEM CONTUS NO OPEN W CONCUS
	85150	BR STEM CONTUSION W OP WND NOS
	85151	BR STEM CONTUS W OP WND/NO COMA
	85152	BR STEM CONTUS W OPEN/BRF COMA
	85153	BR STEM CONTUS W OPEN/MOD COMA
	85154	BR STEM CONTUS W OPEN/PROL COMA
	85155	BR STEM CONTUS W OPEN/DEEP COMA
	85156	BR STEM CONTUS W OPEN/COMA NOS
	85159	BR STEM CONTUS W OP WND/CONCUS
	85160	BRAIN STEM LACN NO OPEN WND NOS
	85161	BR STEM LACN NO OP WND/NO COMA

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
1028-1029 DIAG INV & MANAGEMENT HEAD INJURY		
	85162	BR STEM LACN NO OP WND/BRF COMA
	85163	BR STEM LACN NO OP WND/MOD COMA
	85164	BR STEM LACN NO OPEN/PROL COMA
	85165	BR STEM LACN NO OPEN/DEEP COMA
	85166	BR STEM LACN NO OP WND/COMA NOS
	85169	BR STEM LACN NO OP WND W CONCUS
	85170	BRAIN STEM LACN W OPEN WND NOS
	85171	BR STEM LACN W OPEN WND NO COMA
	85172	BR STEM LACN W OP WND/BRF COMA
	85173	BR STEM LACN W OP WND/MOD COMA
	85174	BR STEM LACN W OP WND/PROL COMA
	85175	BR STEM LACN W OP WND/DEEP COMA
	85176	BR STEM LACN W OP WND/COMA NOS
	85179	BRAIN STEM LACN W OP WND/CONCUS
	85180	OTH BR LACN/CONTUS NO OPEN NOS
	85181	OTH BR LACN/CONTUS NO OPEN/COMA
	85182	OTH BR LACN/CONT NO OP/BRF COMA
	85183	OTH BR LACN/CONT NO OP/MOD COMA
	85184	OTH BR LACN/CONT NO OP/PROL COM
	85185	OTH BR LACN/CONT NO OP/DEEP COM
	85186	OTH BR LACN/CONT NO OP/COMA NOS
	85189	OTH BR LACN/CONT NO OP W CONCUS
	85190	OTH BR LACN/CONTUS W OP WND NOS
	85191	OTH BR LACN/CONTUS W OP/NO COMA
	85192	OTH BR LACN/CONT W OP/BRF COMA
	85193	OTH BR LACN/CONT W OP/MOD COMA
	85194	OTH BR LACN/CONT W OP/PROL COMA
	85195	OTH BR LACN/CONT W OP/DEEP COMA
	85196	OTH BR LACN/CONT W OP/COMA NOS
	85199	OTH BR LACN/CONT W OPEN/CONCUS
	85200	SUBARACH HEM NO OPEN WOUND NOS
	85201	SUBARACH HEM NO OPEN WOUND/COMA
	85202	SUBARACH HEM NO OP WND/BRF COMA
	85203	SUBARACH HEM NO OP WND/MOD COMA
	85204	SUBARACH HEM NO OP WND/PROL COM
	85205	SUBARACH HEM NO OP WND/DEEP COM
	85206	SUBARACH HEM NO OP WND/COMA NOS
	85209	SUBARACH HEM NO OP WND W CONCUS
	85210	SUBARACH HEM W OPEN WOUND NOS
	85211	SUBARACH HEM W OPEN WND/NO COMA
	85212	SUBARACH HEM W OP WND/BRF COMA
	85213	SUBARACH HEM W OP WND/MOD COMA
	85214	SUBARACH HEM W OP WND/PROL COMA
	85215	SUBARACH HEM W OP WND/DEEP COMA
	85216	SUBARACH HEM W OP WND/COMA NOS
	85219	SUBARACH HEM W OPEN WND/CONCUS
	85220	SUBDURAL HEM NO OPEN WOUND NOS
	85221	SUBDURAL HEM NO OPEN WOUND/COMA
	85222	SUBDURAL HEM NO OP WND/BRF COMA
	85223	SUBDURAL HEM NO OP WND/MOD COMA
	85224	SUBDURAL HEM NO OP WND/PROL COM
	85225	SUBDURAL HEM NO OP WND/DEEP COM
	85226	SUBDURAL HEM NO OP WND/COMA NOS
	85229	SUBDURAL HEM NO OP WND W CONCUS
	85230	SUBDURAL HEM W OPEN WOUND NOS
	85231	SUBDURAL HEM W OPEN WND/NO COMA

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
1028-1029 DIAG INV & MANAGEMENT HEAD INJURY		
	85232	SUBDURAL HEM W OP WND/BRF COMA
	85233	SUBDURAL HEM W OP WND/MOD COMA
	85234	SUBDURAL HEM W OP WND/PROL COMA
	85235	SUBDURAL HEM W OP WND/DEEP COMA
	85236	SUBDURAL HEM W OP WND/COMA NOS
	85239	SUBDURAL HEM W OPEN WND/CONCUS
	85240	XDURAL HEM NO OPEN WOUND NOS
	85241	XDURAL HEM NO OPEN WOUND/COMA
	85242	XDURAL HEM NO OPEN WND/BRF COMA
	85243	XDURAL HEM NO OPEN WND/MOD COMA
	85244	XDURAL HEM NO OP WND/PROL COMA
	85245	XDURAL HEM NO OP WND/DEEP COMA
	85246	XDURAL HEM NO OPEN WND/COMA NOS
	85249	XDURAL HEM NO OPEN WND W CONCUS
	85250	XDURAL HEM WITH OPEN WOUND NOS
	85251	XDURAL HEM W OPEN WOUND/NO COMA
	85252	XDURAL HEM W OPEN WND/BRF COMA
	85253	XDURAL HEM W OPEN WND/MOD COMA
	85254	XDURAL HEM W OPEN WND/PROL COMA
	85255	XDURAL HEM W OPEN WND/DEEP COMA
	85256	XDURAL HEM W OPEN WND/COMA NOS
	85259	XDURAL HEM W OPEN WOUND/CONCUS
	85300	OTH INTRACR HEM NO OPEN WND NOS
	85301	OTH INTRACR HEM NO OP WND/COMA
	85302	OTH INTRACR HEM NO OP/BRF COMA
	85303	OTH INTRACR HEM NO OP/MOD COMA
	85304	OTH INTRACR HEM NO OP/PROL COMA
	85305	OTH INTRACR HEM NO OP/DEEP COMA
	85306	OTH INTRACR HEM NO OP/COMA NOS
	85309	OTH INTRACR HEM NO OP W CONCUS
	85310	OTH INTRACR HEM W OPEN WND NOS
	85311	OTH INTRACR HEM W OPEN/NO COMA
	85312	OTH INTRACR HEM W OPEN/BRF COMA
	85313	OTH INTRACR HEM W OPEN/MOD COMA
	85314	OTH INTRACR HEM W OP/PROL COMA
	85315	OTH INTRACR HEM W OP/DEEP COMA
	85316	OTH INTRACR HEM W OPEN/COMA NOS
	85319	OTH INTRACR HEM W OP WND/CONCUS
	85400	OTH INTRACR INJ NO OPEN WND NOS
	85401	OTH INTRACR INJ NO OP WND/COMA
	85402	OTH INTRACR INJ NO OP/BRF COMA
	85403	OTH INTRACR INJ NO OP/MOD COMA
	85404	OTH INTRACR INJ NO OP/PROL COMA
	85405	OTH INTRACR INJ NO OP/DEEP COMA
	85406	OTH INTRACR INJ NO OP/COMA NOS
	85409	OTH INTRACR INJ NO OP W CONCUS
	85410	OTH INTRACR INJ W OPEN WND NOS
	85411	OTH INTRACR INJ W OPEN WND/COMA
	85412	OTH INTRACR INJ W OPEN/BRF COMA
	85413	OTH INTRACR INJ W OPEN/MOD COMA
	85414	OTH INTRACR INJ W OP/PROL COMA
	85415	OTH INTRACR INJ W OP/DEEP COMA
	85416	OTH INTRACR INJ W OPEN/COMA NOS
	85419	OTH INTRACR INJ W OP WND/CONCUS

ACCS CELL
1030-1031 Thoraco-Abdominal and Major Vascular

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
1030-1031 DIAG INV & MANAGEMENT THORACO- ABDOMINAL AND MAJOR VASCULAR		
	8074	FLAIL CHEST
	8075	FRACTURE LARYNX/TRACHEA CLOSED
	8600	PNEUMOTHORAX NO OPEN WND THORAX
	8601	PNEUMOTHORAX W OPEN WND THORAX
	8602	HEMOTHORAX NO OPEN WOUND THORAX
	8603	HEMOTHORAX W OPEN WOUND THORAX
	8604	PNEUMOHEMOTHORAX NO OP WND THOR
	8605	PNEUMOHEMOTHORAX W OP WND THOR
	86100	INJ NOS HEART NO OP WND THORAX
	86101	CONTUS HEART NO OPEN WND THORAX
	86102	LACN NO PENET HRT CHAMB NO OPEN
	86103	LACN W PENET HRT CHAMB NO OPEN
	86110	INJ NOS HEART W OPEN WND THORAX
	86111	CONTUS HEART W OPEN WND THORAX
	86112	LACN NO PENET HRT CHAMB OP WND
	86113	LACN W PENET HRT CHAMB W OP WND
	86120	INJ NOS LUNG NO OPEN WND THORAX
	86121	CONTUSION LUNG NO OP WND THORAX
	86122	LACERATN LUNG NO OP WND THORAX
	86130	INJ NOS LUNG W OPEN WND THORAX
	86131	CONTUSION LUNG W OP WND THORAX
	86132	LACERATION LUNG W OP WND THORAX
	8620	INJURY DIAPHRAGM NO OP WND CAV
	8621	INJURY DIAPHRAGM W OPEN WND CAV
	86221	INJURY BRONCHUS NO OPEN WND CAV
	86222	INJ ESOPHAGUS NO OPEN WOUND CAV
	86229	INJ OTH THOR ORG NO OP WND CAV
	86231	INJURY BRONCHUS W OPEN WND CAV
	86232	INJ ESOPHAGUS W OPEN WOUND CAV
	86239	INJ OTH THOR ORG W OPEN WND CAV
	8628	INJ MULT/NOS THOR ORG NO OP WND
	8629	INJ MULT/NOS THOR ORG W OP WND
	8630	INJURY STOMACH NO OPEN WND CAV
	8631	INJURY STOMACH W OPEN WOUND CAV
	86320	INJ SM INTEST NOS NO OP WND CAV
	86321	INJURY DUODENUM NO OPEN WND CAV
	86329	OTH INJ SM INTEST NO OP WND CAV
	86330	INJ SM INTEST NOS W OP WND CAV
	86331	INJURY DUODENUM W OPEN WND CAV
	86339	OTH INJ SM INTEST W OP WND CAV
	86340	INJURY COLON NOS NO OP WND CAV
	86341	INJ ASCENDING COLON NO OPEN WND
	86342	INJ TRANSVERSE COLON NO OP WND
	86343	INJ DESCENDING COLON NO OP WND
	86344	INJ SIGMOID COLON NO OP WND CAV
	86345	INJURY RECTUM NO OPEN WOUND CAV
	86346	INJ MULT COLON/RECTUM NO OP WND
	86349	OTH INJURY COLON NO OP WND CAV
	86350	INJURY COLON NOS W OPEN WND CAV
	86351	INJ ASCENDING COLON W OPEN WND

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
1030-1031 DIAG INV & MANAGEMENT THORACO- ABDOMINAL AND MAJOR VASCULAR		
	86352	INJ TRANSVERSE COLON W OPEN WND
	86353	INJ DESCENDING COLON W OPEN WND
	86354	INJ SIGMOID COLON W OP WND CAV
	86355	INJURY RECTUM W OPEN WOUND CAV
	86356	INJ MULT COLON/RECTUM W OP WND
	86359	OTH INJURY COLON W OPEN WND CAV
	86380	INJURY GI NOS NO OPEN WOUND CAV
	86381	INJ HEAD PANCREAS NO OP WND CAV
	86382	INJ BODY PANCREAS NO OP WND CAV
	86383	INJ TAIL PANCREAS NO OP WND CAV
	86384	INJ MULT/NOS PANCREAS NO OP WND
	86385	INJURY APPENDIX NO OPEN WND CAV
	86389	OTH INJURY GI NO OPEN WOUND CAV
	86390	INJURY GI NOS W OPEN WOUND CAV
	86391	INJ HEAD PANCREAS W OP WND CAV
	86392	INJ BODY PANCREAS W OP WND CAV
	86393	INJ TAIL PANCREAS W OP WND CAV
	86394	INJ MULT/NOS PANCREAS W OP WND
	86395	INJURY APPENDIX W OPEN WND CAV
	86399	OTH INJURY GI W OPEN WOUND CAV
	86400	INJURY NOS LIVER NO OP WND CAV
	86401	HEMATOMA/CONTUS LIVER NO OP WND
	86402	LACN MINOR LIVER NO OP WND CAV
	86403	LACN MOD LIVER NO OPEN WND CAV
	86404	LACN MAJOR LIVER NO OP WND CAV
	86405	UNS LACN LIVER NO OPEN WND CAV
	86409	OTH INJURY LIVER NO OP WND CAV
	86410	INJURY NOS LIVER W OPEN WND CAV
	86411	HEMATOMA/CONTUS LIVER W OP WND
	86412	LACN MINOR LIVER W OPEN WND CAV
	86413	LACN MOD LIVER W OPEN WOUND CAV
	86414	LACN MAJOR LIVER W OPEN WND CAV
	86415	UNS LACN LIVER W OPEN WND CAV
	86419	OTH INJURY LIVER W OPEN WND CAV
	86500	INJURY NOS SPLEEN NO OP WND CAV
	86501	HEMAT NO RUPT SPLEEN NO OP WND
	86502	CAPSULAR TEARS SPLEEN NO OP WND
	86503	LACN PARENCH SPLEEN NO OPEN WND
	86504	PARENCH DISRUPT SPLEEN NO OPEN
	86509	OTH INJURY SPLEEN NO OP WND CAV
	86510	INJURY NOS SPLEEN W OP WND CAV
	86511	HEMAT NO RUPT SPLEEN W OPEN WND
	86512	CAPSULAR TEARS SPLEEN W OP WND
	86513	LACN PARENCH SPLEEN W OPEN WND
	86514	PARENCH DISRUPT SPLEEN W OP WND
	86519	OTH INJURY SPLEEN W OP WND CAV
	86600	INJURY NOS KIDNEY NO OP WND CAV
	86601	HEMAT NO RUPT KIDNEY NO OP WND
	86602	LACERATION KIDNEY NO OP WND CAV
	86603	COMPL DISRUPT KIDNEY NO OP WND
	86610	INJURY NOS KIDNEY W OP WND CAV
	86611	HEMAT NO RUPT KIDNEY W OPEN WND
	86612	LACERATION KIDNEY W OP WND CAV
	86613	COMPL DISRUPT KIDNEY W OPEN WND
	8670	INJ BLAD/URETHRA NO OP WND CAV
	8671	INJ BLAD/URETHRA W OPEN WND CAV

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
1030-1031 DIAG INV & MANAGEMENT THORACO- ABDOMINAL AND MAJOR VASCULAR		
	8672	INJURY URETER NO OPEN WOUND CAV
	8673	INJURY URETER W OPEN WOUND CAV
	8674	INJURY UTERUS NO OPEN WOUND CAV
	8675	INJURY UTERUS W OPEN WOUND CAV
	8676	INJ OTH PELV ORG NO OP WND CAV
	8677	INJ OTH PELV ORG W OPEN WND CAV
	8678	INJ PELV ORG NOS NO OP WND CAV
	8679	INJ PELV ORG NOS W OPEN WND CAV
	86800	INJ INTRAABD ORG NOS NO OP WND
	86801	INJ ADRENAL GLAND NO OP WND CAV
	86802	INJ BIL/GALLBLAD NO OP WND CAV
	86803	INJ PERITONEUM NO OPEN WND CAV
	86804	INJ RETROPERITONEUM NO OPEN WND
	86809	INJ OTH/MULT INTRAABD NO OP WND
	86810	INJ INTRAABD ORG NOS W OPEN WND
	86811	INJ ADRENAL GLAND W OP WND CAV
	86812	INJ BIL/GALLBLAD W OPEN WND CAV
	86813	INJ PERITONEUM W OPEN WOUND CAV
	86814	INJ RETROPERITONEUM W OPEN WND
	86819	INJ OTH/MULT INTRAABD W OP WND
	8690	INT INJ ORGAN NOS NO OP WND CAV
	8691	INT INJ ORGAN NOS W OP WND CAV
	87400	OP WND LARYNX/TRACHEA NO COMPL
	87401	OPEN WND LARYNX NO COMPLICATION
	87402	OP WND TRACHEA NO COMPLICATION
	87410	OPEN WND LARYNX/TRACHEA W COMPL
	87411	OPEN WND LARYNX W COMPLICATION
	87412	OPEN WND TRACHEA W COMPLICATION
	8742	OPEN WND THYROID GLAND NO COMPL
	8743	OPEN WND THYROID GLAND W COMPL
	8744	OPEN WOUND PHARYNX NO COMPL
	8745	OPEN WOUND PHARYNX WITH COMPL
	8748	OTH/NOS OPEN WND NECK NO COMPL
	8749	OTH/NOS OPEN WOUND NECK W COMPL
	90000	INJURY TO CAROTID ARTERY UNSPEC
	90001	INJURY TO COMMON CAROTID ARTERY
	90002	INJURY EXTERNAL CAROTID ARTERY
	90003	INJURY INTERNAL CAROTID ARTERY
	9001	INJURY TO INTERNAL JUGULAR VEIN
	90081	INJURY TO EXTERNAL JUGULAR VEIN
	90082	INJ MULT BLOOD VESSEL HEAD/NECK
	90089	INJ OTH BLOOD VESSELS HEAD/NECK
	9009	INJ BLOOD VESSELS HEAD/NECK NOS
	9010	INJURY TO THORACIC AORTA
	9011	INJ INNOMINATE/SUBCLAV ARTERIES
	9012	INJURY TO SUPERIOR VENA CAVA
	9013	INJ INNOMINATE/SUBCLAVIAN VEINS
	90140	INJ PULMONARY BLOOD VESSELS NOS
	90141	INJURY TO PULMONARY ARTERY
	90142	INJURY TO PULMONARY VEIN
	90181	INJURY INTERCOSTAL ARTERY/VEIN
	90182	INJ INTERNAL MAMMARY ART/VEIN
	90183	INJURY MULT BLOOD VESSEL THORAX
	90189	INJURY OTH BLOOD VESSELS THORAX
	9019	INJURY BLOOD VESSELS THORAX NOS
	9020	INJURY TO ABDOMINAL AORTA

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
1030-1031 DIAG INV & MANAGEMENT THORACO- ABDOMINAL AND MAJOR VASCULAR		
	90210	INJURY INFERIOR VENA CAVA NOS
	90211	INJURY TO HEPATIC VEINS
	90219	INJURY OTHER INFERIOR VENA CAVA
	90220	INJ CELIAC/MESENTERIC ART NOS
	90221	INJURY TO GASTRIC ARTERY
	90222	INJURY TO HEPATIC ARTERY
	90223	INJURY TO SPLENIC ARTERY
	90224	INJ OTH SPEC BRANCH CELIAC AXIS
	90225	INJ SUPERIOR MESENTERIC ARTERY
	90226	INJ PRIM BRANCH SUP MESENT ART
	90227	INJ INFERIOR MESENTERIC ARTERY
	90229	INJ OTH CELIAC/MESENTER ARTERY
	90231	INJURY SUP MESENTERIC VEIN PRIM
	90232	INJURY INFERIOR MESENTERIC VEIN
	90233	INJURY TO PORTAL VEIN
	90234	INJURY TO SPLENIC VEIN
	90239	INJURY OTH PORTAL/SPLENIC VEINS
	90240	INJURY TO RENAL VESSEL(S) NOS
	90241	INJURY TO RENAL ARTERY
	90242	INJURY TO RENAL VEIN
	90249	INJURY OTH RENAL BLOOD VESSELS
	90250	INJURY TO ILIAC VESSEL(S) NOS
	90251	INJURY TO HYPOGASTRIC ARTERY
	90252	INJURY TO HYPOGASTRIC VEIN
	90253	INJURY TO ILIAC ARTERY
	90254	INJURY TO ILIAC VEIN
	90255	INJURY TO UTERINE ARTERY
	90256	INJURY TO UTERINE VEIN
	90259	INJURY OTH ILIAC BLOOD VESSELS
	90281	INJURY TO OVARIAN ARTERY
	90282	INJURY TO OVARIAN VAIN
	90287	INJ MULT BLOOD VESSELS ABD/PELV
	90289	INJ OTH BLOOD VESSELS ABD/PELV
	9029	INJ BLOOD VESSELS ABD/PELV NOS
	90300	INJURY AXILLARY VESSEL(S) NOS
	90301	INJURY TO AXILLARY ARTERY
	90302	INJURY TO AXILLARY VEIN
	9031	INJURY BRACHIAL BLOOD VESSELS
	9032	INJURY TO RADIAL BLOOD VESSELS
	9033	INJURY TO ULNAR BLOOD VESSELS
	9034	INJURY TO PALMAR ARTERY
	9035	INJURY TO DIGITAL BLOOD VESSELS
	9038	INJ OTH BLOOD VESSEL UPP EXTREM
	9039	INJ BLOOD VESSEL UPP EXTREM NOS
	9040	INJURY TO COMMON FEMORAL ARTERY
	9041	INJURY SUPERFIC FEMORAL ARTERY
	9042	INJURY TO FEMORAL VEINS
	9043	INJURY TO SAPHENOUS VEINS
	90440	INJURY POPLITEAL VESSEL(S) NOS
	90441	INJURY TO POPLITEAL ARTERY
	90442	INJURY TO POPLITEAL VEIN
	90450	INJURY TO TIBIAL VESSEL(S) NOS
	90451	INJURY ANTERIOR TIBIAL ARTERY
	90452	INJURY ANTERIOR TIBIAL VEIN
	90453	INJURY POSTERIOR TIBIAL ARTERY
	90454	INJURY POSTERIOR TIBIAL VEIN

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
1030-1031 DIAG INV & MANAGEMENT THORACO- ABDOMINAL AND MAJOR VASCULAR		
	9046	INJ DEEP PLANTAR BLOOD VESSELS
	9047	INJ OTH BLOOD VESSEL LOW EXTREM
	9048	INJ BLOOD VESSEL LOW EXTREM NOS
	9049	INJURY BLOOD VESSEL UNSPEC SITE
	9916	HYPOTHERMIA
	9918	OTH EFFECTS REDUCED TEMPERATURE
	9919	EFFECT REDUCED TEMPERATURE NOS
	9920	HEAT STROKE AND SUNSTROKE
	9951	ANGIONEUROTIC EDEMA
	9953	ALLERGY UNSPECIFIED

ACCS CELL
1032-1033 Burn Minor

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
1032-1033 BURN MINOR		
	9400	CHEMICAL BURN EYELID/PERIOCULAR
	9401	OTHER BURNS EYELIDS/PERIOCULAR
	9402	ALKALINE BURN CORNEA/CONJUNCT
	9403	ACID BURN CORNEA/CONJUNCTIVA
	9404	OTHER BURN CORNEA/CONJUNCTIVA
	9405	BURN W RUPTURE/DESTRUCT EYEBALL
	9409	UNSPECIFIED BURN EYE AND ADNEXA
	94100	BURN FACE/HEAD NOS DEGREE NOS
	94101	BURN OF EAR UNSPECIFIED DEGREE
	94102	BURN OF EYE UNSPECIFIED DEGREE
	94103	BURN OF LIP(S) UNSPEC DEGREE
	94104	BURN OF CHIN UNSPECIFIED DEGREE
	94105	BURN OF NOSE UNSPECIFIED DEGREE
	94106	BURN OF SCALP UNSPEC DEGREE
	94107	BURN FOREHEAD/CHEEK DEGREE NOS
	94108	BURN OF NECK UNSPECIFIED DEGREE
	94109	BURN MULT FAC/HEAD/NECK DGR NOS
	94110	BURN FACE/HEAD NOS 1ST DEGREE
	94111	BURN OF EAR FIRST DEGREE
	94112	BURN OF EYE FIRST DEGREE
	94113	BURN OF LIP(S) FIRST DEGREE
	94114	BURN OF CHIN FIRST DEGREE
	94115	BURN OF NOSE FIRST DEGREE
	94116	BURN OF SCALP FIRST DEGREE
	94117	BURN FOREHEAD/CHEEK 1ST DEGREE
	94118	BURN OF NECK FIRST DEGREE
	94119	BURN MULT FAC/HEAD/NECK 1ST DGR
	94120	BURN FACE/HEAD NOS 2ND DEGREE
	94121	BURN OF EAR SECOND DEGREE
	94122	BURN OF EYE SECOND DEGREE
	94123	BURN OF LIP(S) SECOND DEGREE
	94124	BURN OF CHIN SECOND DEGREE
	94125	BURN OF NOSE SECOND DEGREE
	94126	BURN OF SCALP SECOND DEGREE
	94127	BURN FOREHEAD/CHEEK 2ND DEGREE
	94128	BURN OF NECK SECOND DEGREE
	94129	BURN MULT FAC/HEAD/NECK 2ND DGR
	94200	BURN OF TRUNK NOS UNSPEC DEGREE
	94201	BURN OF BREAST UNSPEC DEGREE
	94202	BURN CHEST WALL UNSPEC DEGREE
	94203	BURN ABDOMINAL WALL DEGREE NOS
	94204	BURN OF BACK UNSPECIFIED DEGREE
	94205	BURN OF GENITALIA UNSPEC DEGREE
	94209	BURN OTH/MULT TRUNK DEGREE NOS
	94210	BURN OF TRUNK NOS FIRST DEGREE
	94211	BURN OF BREAST FIRST DEGREE
	94212	BURN OF CHEST WALL FIRST DEGREE
	94213	BURN ABDOMINAL WALL 1ST DEGREE
	94214	BURN OF BACK FIRST DEGREE
	94215	BURN OF GENITALIA FIRST DEGREE
	94219	BURN OTH/MULT TRUNK 1ST DEGREE
	94220	BURN OF TRUNK NOS SECOND DEGREE

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
1032-1033 BURN MINOR		
	94221	BURN OF BREAST SECOND DEGREE
	94222	BURN CHEST WALL SECOND DEGREE
	94223	BURN ABDOMINAL WALL 2ND DEGREE
	94224	BURN OF BACK SECOND DEGREE
	94225	BURN OF GENITALIA SECOND DEGREE
	94229	BURN OTH/MULT TRUNK 2ND DEGREE
	94300	BURN UPPER LIMB NOS DEGREE NOS
	94301	BURN OF FOREARM UNSPEC DEGREE
	94302	BURN OF ELBOW UNSPEC DEGREE
	94303	BURN OF UPPER ARM UNSPEC DEGREE
	94304	BURN OF AXILLA UNSPEC DEGREE
	94305	BURN OF SHOULDER UNSPEC DEGREE
	94306	BURN SCAPULAR REGION DEGREE NOS
	94309	BURN MULT UPPER LIMB DEGREE NOS
	94310	BURN UPPER LIMB NOS 1ST DEGREE
	94311	BURN OF FOREARM FIRST DEGREE
	94312	BURN OF ELBOW FIRST DEGREE
	94313	BURN OF UPPER ARM FIRST DEGREE
	94314	BURN OF AXILLA FIRST DEGREE
	94315	BURN OF SHOULDER FIRST DEGREE
	94316	BURN SCAPULAR REGION 1ST DEGREE
	94319	BURN MULT UPPER LIMB 1ST DEGREE
	94320	BURN UPPER LIMB NOS 2ND DEGREE
	94321	BURN OF FOREARM SECOND DEGREE
	94322	BURN OF ELBOW SECOND DEGREE
	94323	BURN OF UPPER ARM SECOND DEGREE
	94324	BURN OF AXILLA SECOND DEGREE
	94325	BURN OF SHOULDER SECOND DEGREE
	94326	BURN SCAPULAR REGION 2ND DEGREE
	94329	BURN MULT UPPER LIMB 2ND DEGREE
	94330	BURN UPPER LIMB NOS 3RD DGR NOS
	94331	BURN FOREARM THIRD DEGREE NOS
	94332	BURN OF ELBOW THIRD DEGREE NOS
	94333	BURN UPPER ARM THIRD DEGREE NOS
	94334	BURN OF AXILLA THIRD DEGREE NOS
	94335	BURN SHOULDER THIRD DEGREE NOS
	94336	BURN SCAPULAR REG 3RD DGR NOS
	94339	BURN MULT UPP LIMB 3RD DGR NOS
	94400	BURN HAND UNSPEC DEGREE UNSPEC
	94401	BURN ONE FINGER UNSPEC DEGREE
	94402	BURN OF THUMB UNSPEC DEGREE
	94403	BURN MULT FINGERS DEGREE NOS
	94404	BURN MULT FINGERS/THUMB DGR NOS
	94405	BURN OF PALM UNSPEC DEGREE
	94406	BURN BACK OF HAND UNSPEC DEGREE
	94407	BURN OF WRIST UNSPEC DEGREE
	94408	BURN MULT WRIST/HAND DEGREE NOS
	94410	BURN HAND UNSPEC FIRST DEGREE
	94411	BURN ONE FINGER FIRST DEGREE
	94412	BURN OF THUMB FIRST DEGREE
	94413	BURN MULT FINGERS FIRST DEGREE
	94414	BURN MULT FINGERS/THUMB 1ST DGR
	94415	BURN OF PALM FIRST DEGREE
	94416	BURN BACK OF HAND FIRST DEGREE
	94417	BURN OF WRIST FIRST DEGREE
	94418	BURN MULT WRIST/HAND 1ST DEGREE

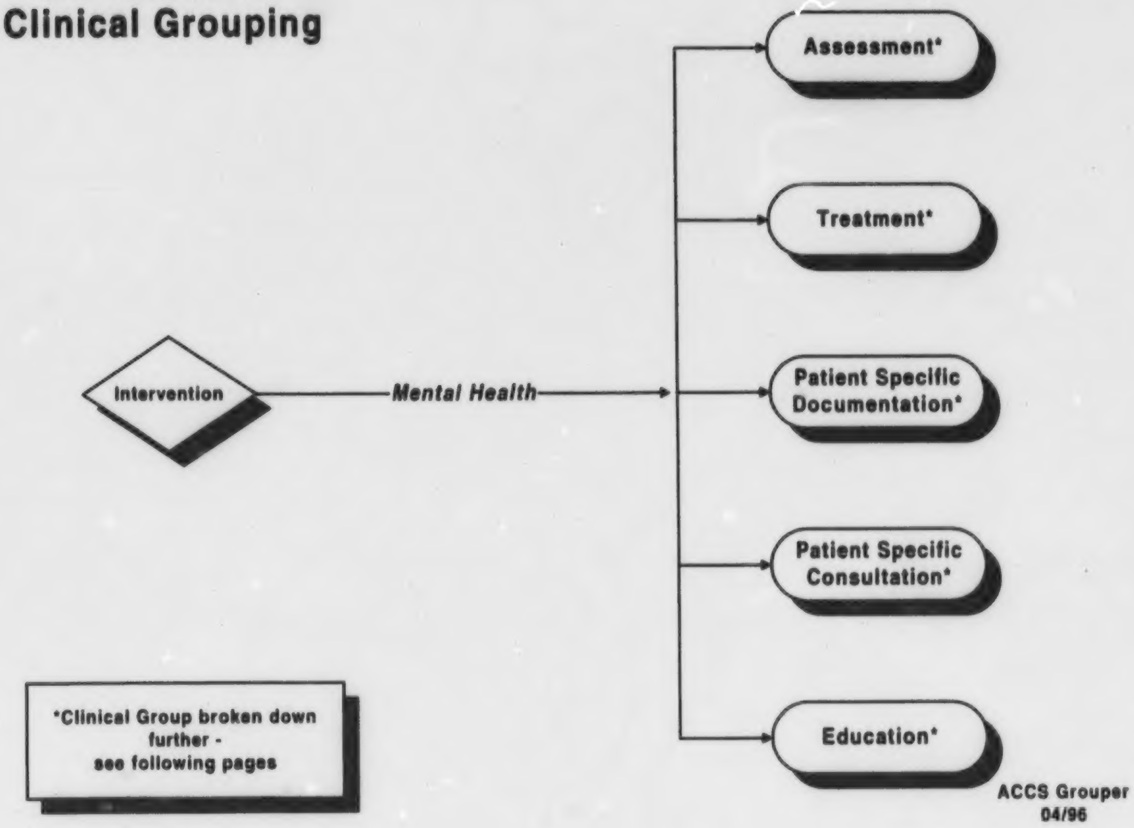
ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
1032-1033 BURN MINOR		
	94420	BURN HAND UNSPEC SECOND DEGREE
	94421	BURN ONE FINGER SECOND DEGREE
	94422	BURN OF THUMB SECOND DEGREE
	94423	BURN MULT FINGERS SECOND DEGREE
	94424	BURN MULT FINGERS/THUMB 2ND DGR
	94425	BURN OF PALM SECOND DEGREE
	94426	BURN BACK OF HAND SECOND DEGREE
	94427	BURN OF WRIST SECOND DEGREE
	94428	BURN MULT WRIST/HAND 2ND DEGREE
	94430	BURN HAND NOS THIRD DEGREE NOS
	94431	BURN ONE FINGER 3RD DEGREE NOS
	94432	BURN OF THUMB THIRD DEGREE NOS
	94433	BURN MULT FINGERS 3RD DGR NOS
	94434	BURN MULT FING/THMB 3RD DGR NOS
	94435	BURN OF PALM THIRD DEGREE NOS
	94436	BURN BACK HAND THIRD DEGREE NOS
	94437	BURN OF WRIST THIRD DEGREE NOS
	94438	BURN MULT WRIST/HND 3RD DGR NOS
	94500	BURN LOWER LIMB NOS DEGREE NOS
	94501	BURN OF TOE(S) UNSPEC DEGREE
	94502	BURN OF FOOT UNSPECIFIED DEGREE
	94503	BURN OF ANKLE UNSPEC DEGREE
	94504	BURN OF LOWER LEG UNSPEC DEGREE
	94505	BURN OF KNEE UNSPECIFIED DEGREE
	94506	BURN OF THIGH UNSPEC DEGREE
	94509	BURN MULT LOWER LIMB DEGREE NOS
	94510	BURN LOWER LIMB NOS 1ST DEGREE
	94511	BURN OF TOE(S) FIRST DEGREE
	94512	BURN OF FOOT FIRST DEGREE
	94513	BURN OF ANKLE FIRST DEGREE
	94514	BURN OF LOWER LEG FIRST DEGREE
	94515	BURN OF KNEE FIRST DEGREE
	94516	BURN OF THIGH FIRST DEGREE
	94519	BURN MULT LOWER LIMB 1ST DEGREE
	94520	BURN LOWER LIMB NOS 2ND DEGREE
	94521	BURN OF TOE(S) SECOND DEGREE
	94522	BURN OF FOOT SECOND DEGREE
	94523	BURN OF ANKLE SECOND DEGREE
	94524	BURN OF LOWER LEG SECOND DEGREE
	94525	BURN OF KNEE SECOND DEGREE
	94526	BURN OF THIGH SECOND DEGREE
	94529	BURN MULT LOWER LIMB 2ND DEGREE
	94530	BURN LOWER LIMB NOS 3RD DGR NOS
	94531	BURN OF TOE(S) THIRD DEGREE NOS
	94532	BURN OF FOOT THIRD DEGREE NOS
	94533	BURN OF ANKLE THIRD DEGREE NOS
	94534	BURN LOWER LEG THIRD DEGREE NOS
	94535	BURN OF KNEE THIRD DEGREE NOS
	94536	BURN OF THIGH THIRD DEGREE NOS
	94539	BURN MULT LOW LIMB 3RD DGR NOS
	9460	BURNS MULT SITES UNSPEC DEGREE
	9461	BURNS OF MULT SITES 1ST DEGREE
	9480	BURN LESS 10% BODY/NO 3RD DGR
	94800	BURN LESS 10% BODY/LESS 10% 3RD
	9481	BURN 10-19% BODY/NO 3RD DEGREE
	94810	BURN 10-19% BODY/LESS 10% 3RD

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
1032-1033 BURN MINOR		
	94811	BURN 10-19% BODY/10-19% 3RD DGR
	9490	BURN UNSPECIFIED DEGREE UNSPEC
	9491	BURN UNSPECIFIED 1ST DEGREE
	9915	CHILBLAINS

ACCS CELL
1034-1035 Major Other Injuries

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
1034-1035 DIAG INV & MANAGEMENT MAJOR OTHER INJURIES		
	9500	OPTIC NERVE INJURY
	9501	INJURY TO OPTIC CHIASM
	9502	INJURY TO OPTIC PATHWAYS
	9503	INJURY TO VISUAL CORTEX
	9509	UNSPEC INJURY OPTIC NERVE/PATH
	9510	INJURY TO OCULOMOTOR NERVE
	9511	INJURY TO TROCHLEAR NERVE
	9512	INJURY TO TRIGEMINAL NERVE
	9513	INJURY TO ABDUCENS NERVE
	9514	INJURY TO FACIAL NERVE
	9515	INJURY TO ACOUSTIC NERVE
	9516	INJURY TO ACCESSORY NERVE
	9517	INJURY TO HYPOGLOSSAL NERVE
	9518	INJURY OTH SPEC CRANIAL NERVES
	9519	INJURY TO UNSPEC CRANIAL NERVE
	95200	C1-C4 UNSPEC CORD INJ NO BONE
	95201	C1-C4 COMPLETE CORD LES NO BONE
	95202	C1-C4 ANT CORD SYND NO BONE INJ
	95203	C1-C4 CENTRAL CORD SYND NO BONE
	95204	C1-C4 OTH SPEC CORD INJ NO BONE
	95205	C5-C7 UNSPEC CORD INJ NO BONE
	95206	C5-C7 COMPLETE CORD LES NO BONE
	95207	C5-C7 ANT CORD SYND NO BONE INJ
	95208	C5-C7 CENTRAL CORD SYND NO BONE
	95209	C5-C7 OTH SPEC CORD INJ NO BONE
	95210	T1-T6 UNSPEC CORD INJ NO BONE
	95211	T1-T6 COMPLETE CORD LES NO BONE
	95212	T1-T6 ANT CORD SYND NO BONE INJ
	95213	T1-T6 CENTRAL CORD SYND NO BONE
	95214	T1-T6 OTH SPEC CORD INJ NO BONE
	95215	T7-T12 UNSPEC CORD INJ NO BONE
	95216	T7-T12 COMPL CORD LES NO BONE
	95217	T7-T12 ANT CORD SYND NO BONE
	95218	T7-T12 CENT CORD SYND NO BONE
	95219	T7-T12 OTH SPEC CORD INJ NO BON
	9522	LUMBAR CORD INJURY NO BONE INJ
	9523	SACRAL CORD INJURY NO BONE INJ
	9524	CAUDA EQUINA INJURY NO BONE INJ
	9528	MULT SPIN CORD INJ NO BONE INJ
	9529	UNSPEC CORD INJURY NO BONE INJ
	9580	AIR EMBOLISM COMPL TRAUMA
	9581	FAT EMBOLISM COMPL TRAUMA
	9582	SECOND/RECUR HEM COMPL TRAUMA
	9587	TRAUM SUBCUTANEOUS EMPHYSEMA
	990	EFFECTS OF RADIATION UNSPEC
	9933	CAISSON DISEASE
	9934	EFFECT AIR PRESS FROM EXPLOSION
	9940	EFFECTS OF LIGHTNING
	9941	DROWNING/NONFATAL SUBMERSION
	9947	ASPHYXIATION AND STRANGULATION
	9948	ELECTROCUTN/NONFATAL EFF ELECT
	99586	MALIGNANT HYPERTHERMIA
	99589	OTHER SPEC ADVERSE EFFECTS NEC

Mental Health
Clinical Grouping


Intervention
Mental Health
Assessment*
Treatment*
Patient Specific Documentation*
Patient Specific Consultation*
Education*

*Clinical Group broken down further -
see following pages

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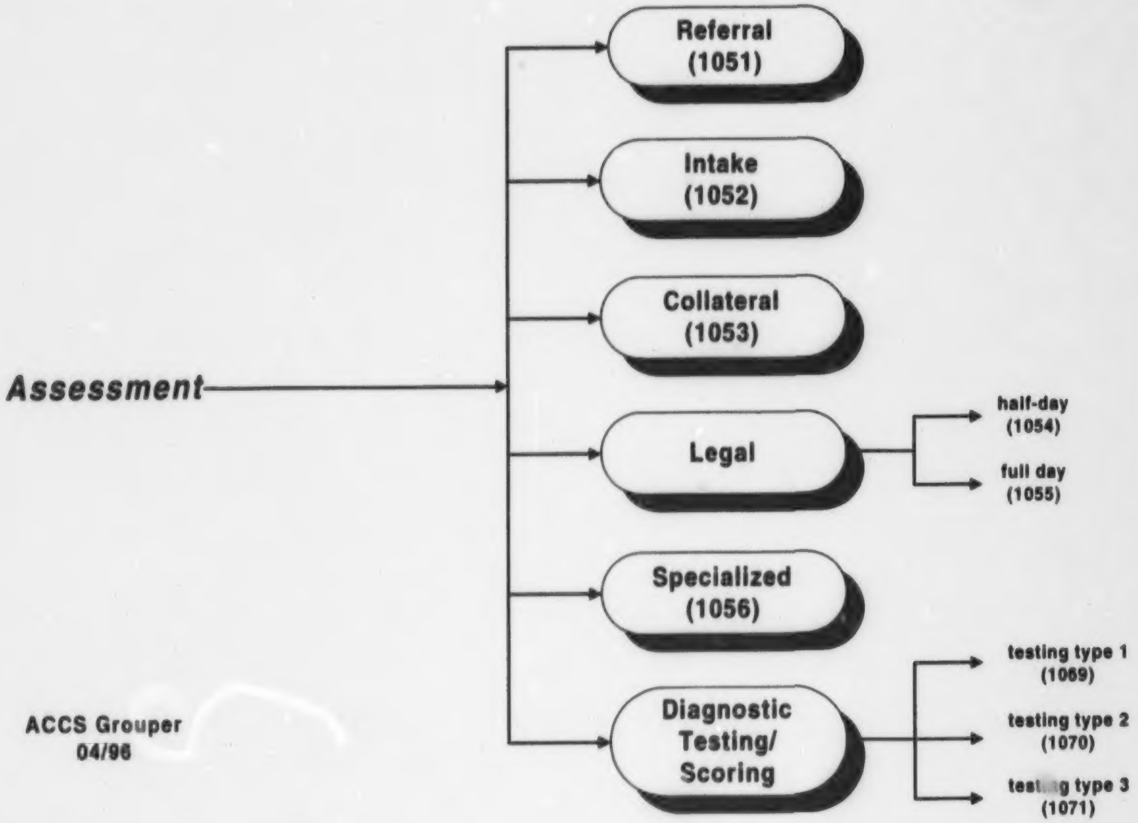
Mental Health
Clinical Grouping


Referral (1051)
Intake (1052)
Collateral (1053)
Assessment
Legal
half-day (1054)
full day (1055)
Specialized (1056)
testing type 1 (1069)
Diagnostic Testing/ Scoring
testing type 2 (1070)
testing type 3 (1071)

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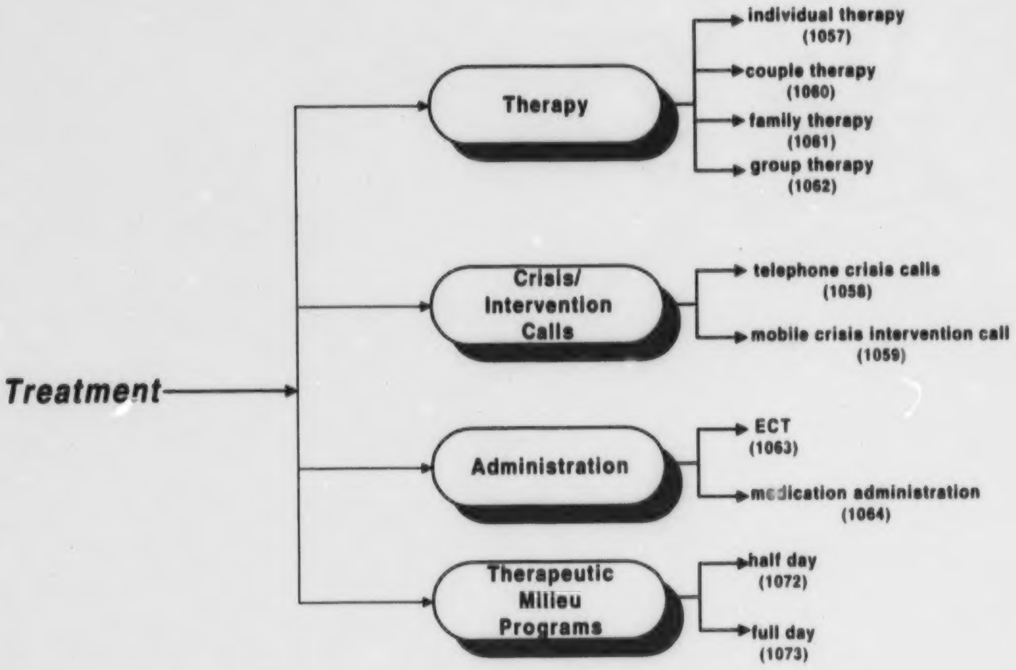
Mental Health Clinical Grouping


Treatment
Therapy
individual therapy (1057)
couple therapy (1060)
family therapy (1061)
group therapy (1062)
Crisis/ Intervention Calls
telephone crisis calls (1058)
mobile crisis intervention call (1059)
Administration
ECT (1063)
medication administration (1064)
Therapeutic Milieu Programs
half day (1072)
full day (1073)

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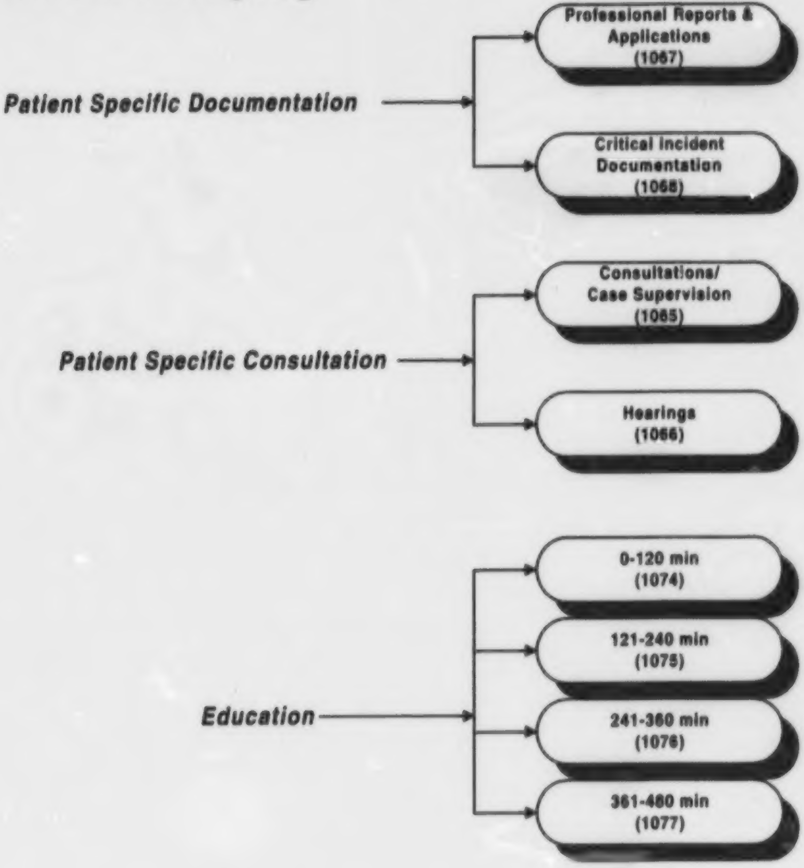
Mental Health Clinical Grouping


Professional Reports & Applications (1067)
Patient Specific Documentation
Critical Incident Documentation (1068)
Consultations/ Case Supervision (1065)
Patient Specific Consultation
Hearings (1066)
0-120 min (1074)
121-240 min (1075)
Education
241-360 min (1076)
361-480 min (1077)

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MENTAL HEALTH GROUPS

ASSESSMENT

ACCS GROUP/DESCN	INTERVENTION DESCRIPTION	INTERVENTION CODE
1051	ASSESSMENT - REFERRAL	940001
1052	ASSESSMENT - INTAKE	940002
1053	ASSESSMENT - COLLATERAL	940003
1054	ASSESSMENT - LEGAL (1/2 DAY)	940004
1055	ASSESSMENT - LEGAL (FULL DAY)	940005
1056	ASSESSMENT - SPECIALIZED	940006
1069	DIAGNOSTIC TESTING/SCORING - TYPE 1	940017
1070	DIAGNOSTIC TESTING/SCORING - TYPE 2	940018
1071	DIAGNOSTIC TESTING/SCORING - TYPE 3	940019

TREATMENT

ACCS GROUP/DESCN	INTERVENTION DESCRIPTION	INTERVENTION CODE
1057	INDIVIDUAL THERAPY	940009
1060	COUPLE THERAPY	940010
1061	FAMILY THERAPY	9442
1062	GROUP THERAPY	940011
1058	TELEPHONE CRISIS CALLS	940007
1059	MOBILE CRISIS CALLS	940008
1063	ELECTROSHOCK THERAPY	9427
1064	MEDICATION ADMINISTRATION	940012
1072	THERAPEUTIC MILIEU (HALF DAY)	940020
1073	THERAPEUTIC MILIEU (FULL DAY)	940021

PATIENT SPECIFIC DOCUMENTATION

ACCS GROUP/DESCN	INTERVENTION DESCRIPTION	INTERVENTION CODE
1067	PATIENT SPECIFIC PROFESSIONAL REPORTS AND APPLICATIONS	940015
1068	PATIENT SPECIFIC CRITICAL DOCUMENTATION	940016

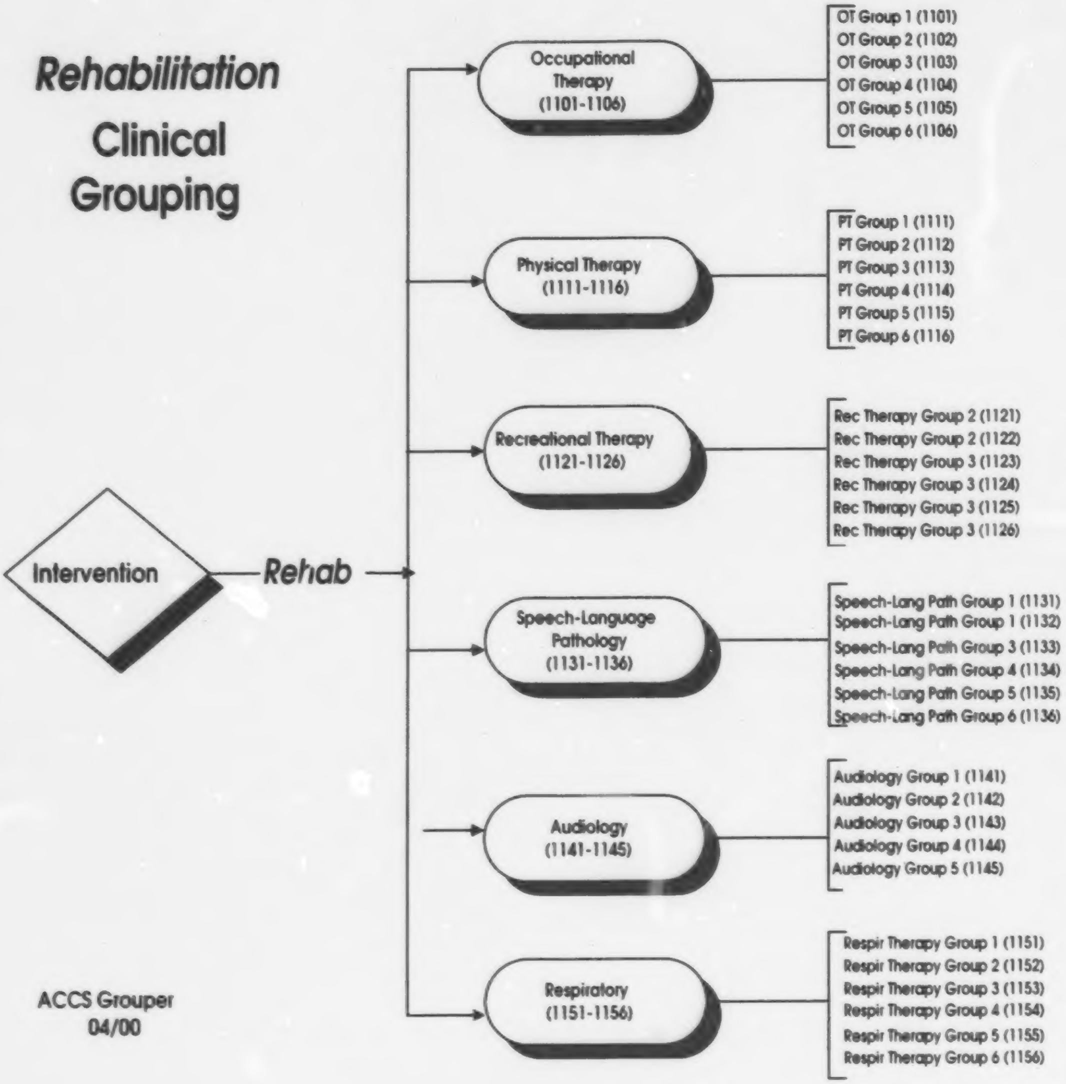
PATIENT SPECIFIC CONSULTATION

ACCS GROUP/DESCN	INTERVENTION DESCRIPTION	INTERVENTION CODE
1065	PATIENT SPECIFIC CONSULTATION/CASE SUPERVISION	940013
1066	PATIENT SPECIFIC CRITICAL DOCUMENTATION	940014

EDUCATION

ACCS GROUP/DESCN	INTERVENTION DESCRIPTION	INTERVENTION CODE
1074	MENTAL HEALTH EDUCATION (2 HRS)	940022
1075	MENTAL HEALTH EDUCATION (4 HRS)	940023
1076	MENTAL HEALTH EDUCATION (6 HRS)	940024
1077	MENTAL HEALTH EDUCATION (8 HRS)	940025

Rehabilitation Clinical Grouping


Intervention
Rehab
Occupational Therapy (1101-1106)
OT Group 1 (1101)
OT Group 2 (1102)
OT Group 3 (1103)
OT Group 4 (1104)
OT Group 5 (1105)
OT Group 6 (1106)
Physical Therapy (1111-1116)
PT Group 1 (1111)
PT Group 2 (1112)
PT Group 3 (1113)
PT Group 4 (1114)
PT Group 5 (1115)
PT Group 6 (1116)
Recreational Therapy (1121-1126)
Rec Therapy Group 2 (1121)
Rec Therapy Group 2 (1122)
Rec Therapy Group 3 (1123)
Rec Therapy Group 3 (1124)
Rec Therapy Group 3 (1125)
Rec Therapy Group 3 (1126)
Speech-Language Pathology (1131-1136)
Speech-Lang Path Group 1 (1131)
Speech-Lang Path Group 1 (1132)
Speech-Lang Path Group 3 (1133)
Speech-Lang Path Group 4 (1134)
Speech-Lang Path Group 5 (1135)
Speech-Lang Path Group 6 (1136)
Audiology (1141-1145)
Audiology Group 1 (1141)
Audiology Group 2 (1142)
Audiology Group 3 (1143)
Audiology Group 4 (1144)
Audiology Group 5 (1145)
Respiratory (1151-1156)
Respir Therapy Group 1 (1151)
Respir Therapy Group 2 (1152)
Respir Therapy Group 3 (1153)
Respir Therapy Group 4 (1154)
Respir Therapy Group 5 (1155)
Respir Therapy Group 6 (1156)

ACCS Grouper
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OCCUPATIONAL THERAPY GROUPS

ACCS GROUP/DESCN	INTERVENTION DESCRIPTION	INTERVENTION CODE
1101 OCCUPATIONAL THERAPY GROUP 1	LOW ASSESSMENT ALONE	938301
	LOW THERAPEUTIC INT ALONE	938302
1102 OCCUPATIONAL THERAPY GROUP 2	MEDIUM ASSESSMENT ALONE	938304
	MEDIUM THERAPEUTIC INT ALONE	938305
	LOW ASSESSMENT AND LOW THERAPEUTIC INT	938301+938302
	LOW ASSESSMENT AND LOW CONSULTATION	938301+938303
	LOW THERAPEUTIC INT AND LOW CONSULTATION	938302+938303
	LOW ASSESSMENT AND LOW THERAPEUTIC INT AND LOW CONSULTATION	938301+938302+938303
1103 OCCUPATIONAL THERAPY GROUP 3	MEDIUM ASSESSMENT AND LOW THERAPEUTIC INT	938304+938302
	MEDIUM ASSESSMENT AND LOW CONSULTATION	938304+938303
	LOW ASSESSMENT AND MEDIUM THERAPEUTIC INT	938301+938305
	LOW ASSESSMENT AND MEDIUM CONSULTATION	938301+938306
	LOW THERAPEUTIC INT AND MEDIUM CONSULTATION	938302+938306
	MEDIUM THERAPEUTIC INT AND LOW CONSULTATION	938305+938303
	LOW ASSESSMENT AND LOW THERAPEUTIC INT AND MEDIUM CONSULTATION	938301+938302+938306
	LOW ASSESSMENT AND MEDIUM THERAPEUTIC INT AND LOW CONSULTATION	938301+938305+938303
	MEDIUM ASSESSMENT AND LOW THERAPEUTIC INT AND LOW CONSULTATION	938304+938302+938303
	LOW ASSESSMENT AND MEDIUM THERAPEUTIC INT AND MEDIUM CONSULTATION	938301+938305+938306
	MEDIUM ASSESSMENT AND LOW THERAPEUTIC INT AND MEDIUM CONSULTATION	938304+938302+938306
	MEDIUM ASSESSMENT AND MEDIUM THERAPEUTIC INT AND LOW CONSULTATION	938304+938305+938303
1104 OCCUPATIONAL THERAPY GROUP 4	HIGH ASSESSMENT ALONE	938307
	HIGH THERAPEUTIC INT ALONE	938308
	HIGH ASSESSMENT AND LOW THERAPEUTIC INT	938307+938302
	HIGH ASSESSMENT AND LOW CONSULTATION	938307+938303
	LOW ASSESSMENT AND HIGH THERAPEUTIC INT	938301+938308
	HIGH THERAPEUTIC INT AND LOW CONSULTATION	938308+938303
	LOW ASSESSMENT AND HIGH CONSULTATION	938301+938309
	LOW THERAPEUTIC INT AND HIGH CONSULTATION	938302+938309
	MEDIUM ASSESSMENT AND MEDIUM THERAPEUTIC INT	938304+938305
	MEDIUM ASSESSMENT AND MEDIUM CONSULTATION	938304+938306
	MEDIUM THERAPEUTIC INT AND MEDIUM CONSULTATION	938305+938306

ACCS GROUP/DESCN	INTERVENTION DESCRIPTION	INTERVENTION CODE
1105 OCCUPATIONAL THERAPY GROUP 5	HIGH ASSESSMENT AND MEDIUM THERAPEUTIC INT	938307+938305
	HIGH ASSESSMENT AND MEDIUM CONSULTATION	938307+938306
	MEDIUM ASSESSMENT AND HIGH THERAPEUTI8C INT	938304+938308
	HIGH THERAPEUTIC INT AND MEDIUM CONSULTATION	938308+938306
	MEDIUM ASSESSMENT AND HIGH CONSULTATION	938304+938309
	MEDIUM THERAPEUTIC INT AND HIGH CONSULTATION	938305+938309
	HIGH ASSESSMENT AND LOW THERAPEUTIC INT AND LOW CONSULTATION	938307+938302+938303
	HIGH ASSESSMENT AND LOW THERAPEUTIC INT AND MEDIUM CONSULTATION	938307+938302+938306
	HIGH ASSESSMENT AND MEDIUM THERAPEUTIC INT AND LOW CONSULTATION	938307+938305+938303
	LOW ASSESSMENT AND HIGH THERAPEUTIC INT AND LOW CONSULTATION	938301+938308+938303
	LOW ASSESSMENT AND HIGH THERAPEUTIC INT AND MEDIUM CONSULTATION	938301+938308+938306
	MEDIUM ASSESSMENT AND HIGH THERAPEUTIC INT AND LOW CONSULTATION	938304+938308+938303
	LOW ASSESSMENT AND LOW THERAPEUTIC INT AND HIGH CONSULTATION	938301+938302+938309
	LOW ASSESSMENT AND MEDIUM THERAPEUTIC INT AND HIGH CONSULTATION	938301+938305+938309
	MEDIUM ASSESSMENT AND LOW THERAPEUTIC INT AND HIGH CONSULTATION	938304+938302+938309
	HIGH ASSESSMENT AND MEDIUM THERAPEUTIC INT AND MEDIUM CONSULTATION	938307+938305+938306
	MEDIUM ASSESSMENT AND HIGH THERAPEUTIC INT AND MEDIUM CONSULTATION	938304+938308+938306
	MEDIUM ASSESSMENT AND MEDIUM THERAPEUTIC INT AND HIGH CONSULTATION	938304+938305+938309
	MEDIUM ASSESSMENT AND MEDIUM THERAPEUTIC INT AND MEDIUM CONSULTATION	938304+938305+938306
1106 OCCUPATIONAL THERAPY GROUP 6	HIGH ASSESSMENT AND HIGH THERAPEUTIC INT	938307+938308
	HIGH ASSESSMENT AND HIGH CONSULTATION	938307+938309
	HIGH THERAPEUTIC INT AND HIGH CONSULTATION	938308+938309
	HIGH ASSESSMENT AND HIGH THERAPEUTIC INT AND LOW CONSULTATION	938307+938308+938303
	HIGH ASSESSMENT AND HIGH THERAPEUTIC INT AND MEDIUM CONSULTATION	938307+938308+938306
	HIGH ASSESSMENT AND LOW THERAPEUTIC INT AND HIGH CONSULTATION	938307+938302+938309
	HIGH ASSESSMENT AND MEDIUM THERAPEUTIC INT HIGH CONSULTATION	938307+938305+938309
	LOW ASSESSMENT AND HIGH THERAPEUTIC INT AND HIGH CONSULTATION	938301+938308+938309
	MEDIUM ASSESSMENT AND HIGH THERAPEUTIC INT AND HIGH CONSULTATION	938304+938308+938309
	HIGH ASSESSMENT AND HIGH THERAPEUTIC INT AND HIGH CONSULTATION	938307+938308+938309

PHYSICAL THERAPY GROUPS

ACCS GROUP/DESCN	INTERVENTION DESCRIPTION	INTERVENTION CODE
1111 PHYSICAL THERAPY GROUP 1	LOW ASSESSMENT ALONE	930001
	LOW THERAPEUTIC INT ALONE	930002
1112 PHYSICAL THERAPY GROUP 2	MEDIUM ASSESSMENT ALONE	930004
	MEDIUM THERAPEUTIC INT ALONE	930005
	LOW ASSESSMENT AND LOW THERAPEUTIC INT	930001+930002
	LOW ASSESSMENT AND LOW CONSULTATION	930001+930003
	LOW THERAPEUTIC INT AND LOW CONSULTATION	930002+930003
	LOW ASSESSMENT AND LOW THERAPEUTIC INT AND LOW CONSULTATION	930001+930002+930003
1113 PHYSICAL THERAPY GROUP 3	MEDIUM ASSESSMENT AND LOW THERAPEUTIC INT	930004+930002
	MEDIUM ASSESSMENT AND LOW CONSULTATION	930004+930003
	LOW ASSESSMENT AND MEDIUM THERAPEUTIC INT	930001+930005
	LOW ASSESSMENT AND MEDIUM CONSULTATION	930001+930006
	LOW THERAPEUTIC INT AND MEDIUM CONSULTATION	930002+930006
	MEDIUM THERAPEUTIC INT AND LOW CONSULTATION	930005+930003
	LOW ASSESSMENT AND LOW THERAPEUTIC INT AND MEDIUM CONSULTATION	930001+930002+930006
	LOW ASSESSMENT AND MEDIUM THERAPEUTIC INT AND LOW CONSULTATION	930001+930005+930003
	MEDIUM ASSESSMENT AND LOW THERAPEUTIC INT AND LOW CONSULTATION	930004+930002+930003
	LOW ASSESSMENT AND MEDIUM THERAPEUTIC INT AND MEDIUM CONSULTATION	930001+930005+930006
	MEDIUM ASSESSMENT AND LOW THERAPEUTIC INT AND MEDIUM CONSULTATION	930004+930002+930006
	MEDIUM ASSESSMENT AND MEDIUM THERAPEUTIC INT AND LOW CONSULTATION	930004+930005+930003
1114 PHYSICAL THERAPY GROUP 4	HIGH ASSESSMENT ALONE	930007
	HIGH THERAPEUTIC INT ALONE	930008
	HIGH ASSESSMENT AND LOW THERAPEUTIC INT	930007+930002
	HIGH ASSESSMENT AND LOW CONSULTATION	930007+930003
	LOW ASSESSMENT AND HIGH THERAPEUTIC INT	930001+930008
	HIGH THERAPEUTIC INT AND LOW CONSULTATION	930008+930003
	LOW ASSESSMENT AND HIGH CONSULTATION	930001+930009
	LOW THERAPEUTIC INT AND HIGH CONSULTATION	930002+930009
	MEDIUM ASSESSMENT AND MEDIUM THERAPEUTIC INT	930004+930005
	MEDIUM ASSESSMENT AND MEDIUM CONSULTATION	930004+930006
	MEDIUM THERAPEUTIC INT AND MEDIUM CONSULTATION	930005+930006
1115 PHYSICAL THERAPY GROUP 5	HIGH ASSESSMENT AND MEDIUM THERAPEUTIC INT	930007+930005
	HIGH ASSESSMENT AND MEDIUM CONSULTATION	930007+930006
	MEDIUM ASSESSMENT AND HIGH THERAPEUTIC INT	930004+930008
	HIGH THERAPEUTIC INT AND MEDIUM CONSULTATION	930008+930006
	MEDIUM ASSESSMENT AND HIGH CONSULTATION	930004+930009

ACCS GROUP/DESCN	INTERVENTION DESCRIPTION	INTERVENTION CODE
1115 PHYSICAL THERAPY GROUP 5 (Cont.)	MEDIUM THERAPEUTIC INT AND HIGH CONSULTATION	930005+930009
	HIGH ASSESSMENT AND LOW THERAPEUTIC INT AND LOW CONSULTATION	930007+930002+930003
	HIGH ASSESSMENT AND LOW THERAPEUTIC INT AND MEDIUM CONSULTATION	930007+930002+930006
	HIGH ASSESSMENT AND MEDIUM THERAPEUTIC INT AND LOW CONSULTATION	930007+930005+930003
	LOW ASSESSMENT AND HIGH THERAPEUTIC INT AND LOW CONSULTATION	930001+930008+930003
	LOW ASSESSMENT AND HIGH THERAPEUTIC INT AND MEDIUM CONSULTATION	930001+930008+930006
	MEDIUM ASSESSMENT AND HIGH THERAPEUTIC INT AND LOW CONSULTATION	930004+930008+930003
	LOW ASSESSMENT AND LOW THERAPEUTIC INT AND HIGH CONSULTATION	930001+930002+930009
	LOW ASSESSMENT AND MEDIUM THERAPEUTIC INT AND HIGH CONSULTATION	930001+930005+930009
	MEDIUM ASSESSMENT AND LOW THERAPEUTIC INT AND HIGH CONSULTATION	930004+930002+930009
	HIGH ASSESSMENT AND MEDIUM THERAPEUTIC INT AND MEDIUM CONSULTATION	930007+930005+930006
	MEDIUM ASSESSMENT AND HIGH THERAPEUTIC INT AND MEDIUM CONSULTATION	930004+930008+930006
	MEDIUM ASSESSMENT AND MEDIUM THERAPEUTIC INT AND HIGH CONSULTATION	930004+930005+930009
	MEDIUM ASSESSMENT AND MEDIUM THERAPEUTIC INT AND MEDIUM CONSULTATION	930004+930005+930006
1116 PHYSICAL THERAPY GROUP 6	HIGH ASSESSMENT AND HIGH THERAPEUTIC INT	930007+930008
	HIGH ASSESSMENT AND HIGH CONSULTATION	930007+930009
	HIGH THERAPEUTIC INT AND HIGH CONSULTATION	930008+930009
	HIGH ASSESSMENT AND HIGH THERAPEUTIC INT AND LOW CONSULTATION	930007+930008+930003
	HIGH ASSESSMENT AND HIGH THERAPEUTIC INT AND MEDIUM CONSULTATION	930007+930008+930006
	HIGH ASSESSMENT AND LOW THERAPEUTIC INT AND HIGH CONSULTATION	930007+930002+930009
	HIGH ASSESSMENT AND MEDIUM THERAPEUTIC INT HIGH CONSULTATION	930007+930005+930009
	LOW ASSESSMENT AND HIGH THERAPEUTIC INT AND HIGH CONSULTATION	930001+930008+930009
	MEDIUM ASSESSMENT AND HIGH THERAPEUTIC INT AND HIGH CONSULTATION	930004+930008+930009
	HIGH ASSESSMENT AND HIGH THERAPEUTIC INT AND HIGH CONSULTATION	930007+930008+930009

RECREATIONAL THERAPY GROUPS

ACCS GROUP/DESCH	INTERVENTION DESCRIPTION	INTERVENTION CODE
1121 RECREATIONAL THERAPY GROUP 1	LOW ASSESSMENT ALONE	938101
	LOW THERAPEUTIC INT ALONE	938102
1122 RECREATIONAL THERAPY GROUP 2	MEDIUM ASSESSMENT ALONE	938104
	MEDIUM THERAPEUTIC INT ALONE	938105
	LOW ASSESSMENT AND LOW THERAPEUTIC INT	938101+938102
	LOW ASSESSMENT AND LOW CONSULTATION	938101+938103
	LOW THERAPEUTIC INT AND LOW CONSULTATION	938102+938103
	LOW ASSESSMENT AND LOW THERAPEUTIC INT AND LOW CONSULTATION	938101+938102+938103
1123 RECREATIONAL THERAPY GROUP 3	MEDIUM ASSESSMENT AND LOW THERAPEUTIC INT	938104+938102
	MEDIUM ASSESSMENT AND LOW CONSULTATION	938104+938103
	LOW ASSESSMENT AND MEDIUM THERAPEUTIC INT	938101+938105
	LOW ASSESSMENT AND MEDIUM CONSULTATION	938101+938106
	LOW THERAPEUTIC INT AND MEDIUM CONSULTATION	938102+938106
	MEDIUM THERAPEUTIC INT AND LOW CONSULTATION	938105+938103
	LOW ASSESSMENT AND LOW THERAPEUTIC INT AND MEDIUM CONSULTATION	938101+938102+938106
	LOW ASSESSMENT AND MEDIUM THERAPEUTIC INT AND LOW CONSULTATION	938101+938105+938103
	MEDIUM ASSESSMENT AND LOW THERAPEUTIC INT AND LOW CONSULTATION	938104+938102+938103
	LOW ASSESSMENT AND MEDIUM THERAPEUTIC INT AND MEDIUM CONSULTATION	938101+938105+938106
	MEDIUM ASSESSMENT AND LOW THERAPEUTIC INT AND MEDIUM CONSULTATION	938104+938102+938106
	MEDIUM ASSESSMENT AND MEDIUM THERAPEUTIC INT AND LOW CONSULTATION	938104+938105+938103
1124 RECREATIONAL THERAPY GROUP 4	HIGH ASSESSMENT ALONE	938107
	HIGH THERAPEUTIC INT ALONE	938108
	HIGH ASSESSMENT AND LOW THERAPEUTIC INT	938107+938102
	HIGH ASSESSMENT AND LOW CONSULTATION	938107+938103
	LOW ASSESSMENT AND HIGH THERAPEUTIC INT	938101+938108
	HIGH THERAPEUTIC INT AND LOW CONSULTATION	938108+938103
	LOW ASSESSMENT AND HIGH CONSULTATION	938101+938109
	LOW THERAPEUTIC INT AND HIGH CONSULTATION	938102+938109
	MEDIUM ASSESSMENT AND MEDIUM THERAPEUTIC INT	938104+938105
	MEDIUM ASSESSMENT AND MEDIUM CONSULTATION	938104+938106
	MEDIUM THERAPEUTIC INT AND MEDIUM CONSULTATION	938105+938106
1125 RECREATIONAL THERAPY GROUP 5	HIGH ASSESSMENT AND MEDIUM THERAPEUTIC INT	938107+938105
	HIGH ASSESSMENT AND MEDIUM CONSULTATION	938107+938106
	MEDIUM ASSESSMENT AND HIGH THERAPEUTIC INT	938104+938108
	HIGH THERAPEUTIC INT AND MEDIUM CONSULTATION	938108+938106
	MEDIUM ASSESSMENT AND HIGH CONSULTATION	938104+938109
	MEDIUM THERAPEUTIC INT AND HIGH CONSULTATION	938105+938109

ACCS GROUP/DESCN	INTERVENTION DESCRIPTION	INTERVENTION CODE
1125 RECREATIONAL THERAPY GROUP 5 (Cont.)	HIGH ASSESSMENT AND LOW THERAPEUTIC INT AND LOW CONSULTATION	938107+938102+938103
	HIGH ASSESSMENT AND LOW THERAPEUTIC INT AND MEDIUM CONSULTATION	938107+938102+938106
	HIGH ASSESSMENT AND MEDIUM THERAPEUTIC INT AND LOW CONSULTATION	938107+938105+938103
	LOW ASSESSMENT AND HIGH THERAPEUTIC INT AND LOW CONSULTATION	938101+938108+938103
	LOW ASSESSMENT AND HIGH THERAPEUTIC INT AND MEDIUM CONSULTATION	938101+938108+938106
	MEDIUM ASSESSMENT AND HIGH THERAPEUTIC INT AND LOW CONSULTATION	938104+938108+938103
	LOW ASSESSMENT AND LOW THERAPEUTIC INT AND HIGH CONSULTATION	938101+938102+938109
	LOW ASSESSMENT AND MEDIUM THERAPEUTIC INT AND HIGH CONSULTATION	938101+938105+938109
	MEDIUM ASSESSMENT AND LOW THERAPEUTIC INT AND HIGH CONSULTATION	938104+938102+938109
	HIGH ASSESSMENT AND MEDIUM THERAPEUTIC INT AND MEDIUM CONSULTATION	938107+938105+938106
	MEDIUM ASSESSMENT AND HIGH THERAPEUTIC INT AND MEDIUM CONSULTATION	938104+938108+938106
	MEDIUM ASSESSMENT AND MEDIUM THERAPEUTIC INT AND HIGH CONSULTATION	938104+938105+938109
	MEDIUM ASSESSMENT AND MEDIUM THERAPEUTIC INT AND MEDIUM CONSULTATION	938104+938105+938106
1126 RECREATIONAL THERAPY GROUP 6	HIGH ASSESSMENT AND HIGH THERAPEUTIC INT	938107+938108
	HIGH ASSESSMENT AND HIGH CONSULTATION	938107+938109
	HIGH THERAPEUTIC INT AND HIGH CONSULTATION	938108+938109
	HIGH ASSESSMENT AND HIGH THERAPEUTIC INT AND LOW CONSULTATION	938107+938108+938103
	HIGH ASSESSMENT AND HIGH THERAPEUTIC INT AND MEDIUM CONSULTATION	938107+938108+938106
	HIGH ASSESSMENT AND LOW THERAPEUTIC INT AND HIGH CONSULTATION	938107+938102+938109
	HIGH ASSESSMENT AND MEDIUM THERAPEUTIC INT HIGH CONSULTATION	938107+938105+938109
	LOW ASSESSMENT AND HIGH THERAPEUTIC INT AND HIGH CONSULTATION	938101+938108+938109
	MEDIUM ASSESSMENT AND HIGH THERAPEUTIC INT AND HIGH CONSULTATION	938104+938108+938109
	HIGH ASSESSMENT AND HIGH THERAPEUTIC INT AND HIGH CONSULTATION	938107+938108+938109

SPEECH-LANGUAGE PATHOLOGY GROUPS

ACCS GROUP/DESCN	INTERVENTION DESCRIPTION	INTERVENTION CODE
1131 SPEECH-LANGUAGE PATHOLOGY GROUP 1	LOW ASSESSMENT ALONE	937001
	LOW THERAPEUTIC INT ALONE	937002
1132 SPEECH-LANGUAGE PATHOLOGY GROUP 2	MEDIUM ASSESSMENT ALONE	937003
	MEDIUM THERAPEUTIC INT ALONE	937004
	LOW ASSESSMENT AND LOW THERAPEUTIC INT	937001+937002
	LOW ASSESSMENT AND LOW CONSULTATION	937001+937007
	LOW THERAPEUTIC INT AND LOW CONSULTATION	937002+937007
	LOW ASSESSMENT AND LOW THERAPEUTIC INT AND LOW CONSULTATION	937001+937002+937007
1133 SPEECH-LANGUAGE PATHOLOGY GROUP 3	MEDIUM ASSESSMENT AND LOW THERAPEUTIC INT	937003+937002
	MEDIUM ASSESSMENT AND LOW CONSULTATION	937003+937007
	LOW ASSESSMENT AND MEDIUM THERAPEUTIC INT	937001+937004
	LOW ASSESSMENT AND MEDIUM CONSULTATION	937001+937008
	LOW THERAPEUTIC INT AND MEDIUM CONSULTATION	937002+937008
	MEDIUM THERAPEUTIC INT AND LOW CONSULTATION	937004+937007
	LOW ASSESSMENT AND LOW THERAPEUTIC INT AND MEDIUM CONSULTATION	937001+937002+937008
	LOW ASSESSMENT AND MEDIUM THERAPEUTIC INT AND LOW CONSULTATION	937001+937004+937007
	MEDIUM ASSESSMENT AND LOW THERAPEUTIC INT AND LOW CONSULTATION	937003+937002+937007
	LOW ASSESSMENT AND MEDIUM THERAPEUTIC INT AND MEDIUM CONSULTATION	937001+937004+937008
	MEDIUM ASSESSMENT AND LOW THERAPEUTIC INT AND MEDIUM CONSULTATION	937003+937002+937008
	MEDIUM ASSESSMENT AND MEDIUM THERAPEUTIC INT AND LOW CONSULTATION	937003+937004+937007
1134 SPEECH-LANGUAGE PATHOLOGY GROUP 4	HIGH THERAPEUTIC INT ALONE	937006
	LOW ASSESSMENT AND HIGH CONSULTATION	937001+937009
	LOW THERAPEUTIC INT AND HIGH CONSULTATION	937002+937009
1135 SPEECH-LANGUAGE PATHOLOGY GROUP 5	HIGH ASSESSMENT ALONE	937005
	HIGH ASSESSMENT AND LOW THERAPEUTIC INT	937005+937002
	HIGH ASSESSMENT AND LOW CONSULTATION	937005+937007
	HIGH THERAPEUTIC INT AND LOW CONSULTATION	937006+937007
	LOW ASSESSMENT AND HIGH THERAPEUTIC INT	937001+937006
	MEDIUM ASSESSMENT AND MEDIUM THERAPEUTIC INT	937003+937004
	MEDIUM ASSESSMENT AND MEDIUM CONSULTATION	937003+937008
	MEDIUM THERAPEUTIC INT AND MEDIUM CONSULTATION	937004+937008

ACCS GROUP/DESCN	INTERVENTION DESCRIPTION	INTERVENTION CODE
1135 SPEECH-LANGUAGE PATHOLOGY GROUP 5 (Cont.)	HIGH ASSESSMENT AND MEDIUM THERAPEUTIC INT	937005+937004
	HIGH ASSESSMENT AND MEDIUM CONSULTATION	937005+937008
	MEDIUM ASSESSMENT AND HIGH THERAPEUTIC INT	937003+937006
	HIGH THERAPEUTIC INT AND MEDIUM CONSULTATION	937006+937008
	MEDIUM ASSESSMENT AND HIGH CONSULTATION	937003+937009
	MEDIUM THERAPEUTIC INT AND HIGH CONSULTATION	937004 +937009
	HIGH ASSESSMENT AND LOW THERAPEUTIC INT AND LOW CONSULTATION	937005+937002+937007
	HIGH ASSESSMENT AND LOW THERAPEUTIC INT AND MEDIUM CONSULTATION	937005+937002+937008
	HIGH ASSESSMENT AND MEDIUM THERAPEUTIC INT AND LOW CONSULTATION	937005+937004+937007
	LOW ASSESSMENT AND HIGH THERAPEUTIC INT AND LOW CONSULTATION	937001+937006+937007
	LOW ASSESSMENT AND HIGH THERAPEUTIC INT AND MEDIUM CONSULTATION	937001+937006+937008
	MEDIUM ASSESSMENT AND HIGH THERAPEUTIC INT AND LOW CONSULTATION	937003+937006+937007
	LOW ASSESSMENT AND LOW THERAPEUTIC INT AND HIGH CONSULTATION	937001+937002+937009
	LOW ASSESSMENT AND MEDIUM THERAPEUTIC INT AND HIGH CONSULTATION	937001+937004+937009
	MEDIUM ASSESSMENT AND LOW THERAPEUTIC INT AND HIGH CONSULTATION	937003+937002+937009
	HIGH ASSESSMENT AND MEDIUM THERAPEUTIC INT AND MEDIUM CONSULTATION	937005+937004+937008
	MEDIUM ASSESSMENT AND HIGH THERAPEUTIC INT AND MEDIUM CONSULTATION	937003+937006+937008
	MEDIUM ASSESSMENT AND MEDIUM THERAPEUTIC INT AND HIGH CONSULTATION	937003+937004+937009
	MEDIUM ASSESSMENT AND MEDIUM THERAPEUTIC INT AND MEDIUM CONSULTATION	937003+937004+937008
1136 SPEECH-LANGUAGE PATHOLOGY GROUP 6	HIGH ASSESSMENT AND HIGH THERAPEUTIC INT	937005+937006
	HIGH ASSESSMENT AND HIGH CONSULTATION	937005+937009
	HIGH THERAPEUTIC INT AND HIGH CONSULTATION	937006+937009
	HIGH ASSESSMENT AND HIGH THERAPEUTIC INT AND LOW CONSULTATION	937005+937006+937007
	HIGH ASSESSMENT AND HIGH THERAPEUTIC INT AND MED CONSULTATION	937005+937006+937008
	HIGH ASSESSMENT AND LOW THERAPEUTIC INT AND HIGH CONSULTATION	937005+937002+937009
	HIGH ASSESSMENT AND MEDIUM THERAPEUTIC INT AND HIGH CONSULTATION	937005+937004+937009
	LOW ASSESSMENT AND HIGH THERAPEUTIC INT AND HIGH CONSULTATION	937001+937006+937009

ACCS GROUP/DESCN	INTERVENTION DESCRIPTION	INTERVENTION CODE
1136 SPEECH-LANGUAGE PATHOLOGY GROUP 6 (Cont.)	MEDIUM ASSESSMENT AND HIGH THERAPEUTIC INT AND HIGH CONSULTATION	937003+937006+937009
	HIGH ASSESSMENT AND HIGH THERAPEUTIC INT AND HIGH CONSULTATION	937005+937006+937009

AUDIOLOGY GROUPS

ACCS GROUP/DESCN	INTERVENTION DESCRIPTION	INTERVENTION CODE
1141 AUDIOLOGY GROUP 1	LOW ASSESSMENT ALONE	954001
	LOW THERAPEUTIC INT ALONE	954002
1142 AUDIOLOGY GROUP 2	MEDIUM ASSESSMENT ALONE	954004
	MEDIUM THERAPEUTIC INT ALONE	954005
	LOW ASSESSMENT AND LOW THERAPEUTIC INT	954001+954002
	LOW ASSESSMENT AND LOW CONSULTATION	954001+954003
	LOW THERAPEUTIC INT AND LOW CONSULTATION	954002+954003
	LOW ASSESSMENT AND LOW THERAPEUTIC INT AND LOW CONSULTATION	954001+954002+954003
	MEDIUM ASSESSMENT AND LOW THERAPEUTIC INT	954004+954002
	MEDIUM ASSESSMENT AND LOW CONSULTATION	954004+954003
	LOW ASSESSMENT AND MEDIUM THERAPEUTIC INT	954001+954005
	LOW ASSESSMENT AND MEDIUM CONSULTATION	954001+954006
	LOW THERAPEUTIC INT AND MEDIUM CONSULTATION	954002+954006
	MEDIUM THERAPEUTIC INT AND LOW CONSULTATION	954005+954003
	LOW ASSESSMENT AND LOW THERAPEUTIC INT AND MEDIUM CONSULTATION	954001+954002+954006
	LOW ASSESSMENT AND MEDIUM THERAPEUTIC INT AND LOW CONSULTATION	954001+954005+954003
	MEDIUM ASSESSMENT AND LOW THERAPEUTIC INT AND LOW CONSULTATION	954004+954002+954003
	LOW ASSESSMENT AND MEDIUM THERAPEUTIC INT AND MEDIUM CONSULTATION	954001+954005+954006
	MEDIUM ASSESSMENT AND LOW THERAPEUTIC INT AND MEDIUM CONSULTATION	954004+954002+954006
	MEDIUM ASSESSMENT AND MEDIUM THERAPEUTIC INT AND LOW CONSULTATION	954004+954005+954003
1143 AUDIOLOGY GROUP 3	HIGH ASSESSMENT ALONE	954007
	HIGH THERAPEUTIC INT ALONE	954008
	HIGH ASSESSMENT AND LOW THERAPEUTIC INT	954007+954002
	HIGH ASSESSMENT AND LOW CONSULTATION	954007+954003
	LOW ASSESSMENT AND HIGH THERAPEUTIC INT	954001+954008
	HIGH THERAPEUTIC INT AND LOW CONSULTATION	954008+954003
	LOW ASSESSMENT AND HIGH CONSULTATION	954001+954009
	LOW THERAPEUTIC INT AND HIGH CONSULTATION	954002+954009
	MEDIUM ASSESSMENT AND MEDIUM THERAPEUTIC INT	954004+954005

ACCS GROUP/DESCN	INTERVENTION DESCRIPTION	INTERVENTION CODE
1143 AUDIOLOGY GROUP 3 (Cont.)	MEDIUM ASSESSMENT AND MEDIUM CONSULTATION	954004+954006
	MEDIUM THERAPEUTIC INT AND MEDIUM CONSULTATION	954005+954006
	HIGH ASSESSMENT AND MEDIUM THERAPEUTIC INT	954007+954005
	HIGH ASSESSMENT AND MEDIUM CONSULTATION	954007+954006
	MEDIUM ASSESSMENT AND HIGH THERAPEUTIC INT	954004+954008
	HIGH THERAPEUTIC INT AND MEDIUM CONSULTATION	954008+954006
	MEDIUM ASSESSMENT AND HIGH CONSULTATION	954004+954009
	MEDIUM THERAPEUTIC INT AND HIGH CONSULTATION	954005+954009
	HIGH ASSESSMENT AND LOW THERAPEUTIC INT AND LOW CONSULTATION	954007+954002+954003
	HIGH ASSESSMENT AND LOW THERAPEUTIC INT AND MEDIUM CONSULTATION	954007+954002+954006
	HIGH ASSESSMENT AND MEDIUM THERAPEUTIC INT AND LOW CONSULTATION	954007+954005+954003
	LOW ASSESSMENT AND HIGH THERAPEUTIC INT AND LOW CONSULTATION	954001+954008+954003
	LOW ASSESSMENT AND HIGH THERAPEUTIC INT AND MEDIUM CONSULTATION	954001+954008+954006
	MEDIUM ASSESSMENT AND HIGH THERAPEUTIC INT AND LOW CONSULTATION	954004+954008+954003
	LOW ASSESSMENT AND LOW THERAPEUTIC INT AND HIGH CONSULTATION	954001+954002+954009
	LOW ASSESSMENT AND MEDIUM THERAPEUTIC INT AND HIGH CONSULTATION	954001+954005+954009
	MEDIUM ASSESSMENT AND LOW THERAPEUTIC INT AND HIGH CONSULTATION	954004+954002+954009
	HIGH ASSESSMENT AND MEDIUM THERAPEUTIC INT AND MEDIUMCONSULTATION	954007+954005+954006
	MEDIUM ASSESSMENT AND HIGH THERAPEUTIC INT AND MEDIUM CONSULTATION	954004+954008+954006
	MEDIUM ASSESSMENT AND MEDIUM THERAPEUTIC INT AND HIGH CONSULTATION	954004+954005+954009
	MEDIUM ASSESSMENT AND MEDIUM THERAPEUTIC INT AND MEDIUM CONSULTATION	954004+954005+954006
1144 AUDIOLOGY GROUP 4	HIGH ASSESSMENT AND HIGH THERAPEUTIC INT	954007+954008
	HIGH ASSESSMENT AND HIGH CONSULTATION	954007+954009
	HIGH THERAPEUTIC INT AND HIGH CONSULTATION	954008+954009
	HIGH ASSESSMENT INT AND HIGH THERAPEUTIC INT AND LOW CONSULTATION	954007+954008+954003
	HIGH ASSESSMENT AND HIGH THERAPEUTIC INT AND MEDIUM CONSULTATION	954007+954008+954006
	HIGH ASSESSMENT AND LOW THERAPEUTIC INT AND HIGH CONSULTATION	954007+954002+954009
	HIGH ASSESSMENT AND MEDIUM THERAPEUTIC INT AND HIGH CONSULTATION	954007+954005+954009

ACCS GROUP/DESCN	INTERVENTION DESCRIPTION	INTERVENTION CODE
1144 AUDIOLOGY GROUP 4 (Cont.)	LOW ASSESSMENT AND HIGH THERAPEUTIC INT AND HIGH CONSULTATION	954001+954008+954009
	MEDIUM ASSESSMENT AND HIGH THERAPEUTIC INT AND HIGH CONSULTATION	954004+954008+954009
	HIGH ASSESSMENT AND HIGH THERAPEUTIC INT AND HIGH CONSULTATION	954007+954008+954009
1145 AUDIOLOGY GROUP 5 (COCHLEAR IMPLANT)	LOW TREATMENT FOR COCHLEAR IMPLANT	954010
	MEDIUM TREATMENT FOR COCHLEAR IMPLANT	954011
	HIGH TREATMENT FOR COCHLEAR IMPLANT	954012

RESPIRATORY THERAPY GROUPS

ACCS GROUP/DESCN	INTERVENTION DESCRIPTION	INTERVENTION CODE
1151 RESPIRATORY THERAPY GROUP 1	LOW ASSESSMENT ALONE	939001
	LOW THERAPEUTIC INT ALONE	939002
1152 RESPIRATORY THERAPY GROUP 2	MEDIUM ASSESSMENT ALONE	939004
	MEDIUM THERAPEUTIC INT ALONE	939005
	LOW ASSESSMENT AND LOW THERAPEUTIC INT	939001+939002
	LOW ASSESSMENT AND LOW CONSULTATION	939001+939003
	LOW THERAPEUTIC INT AND LOW CONSULTATION	939002+939003
	LOW ASSESSMENT AND LOW THERAPEUTIC INT AND LOW CONSULTATION	939001+939002+939003
1153 RESPIRATORY THERAPY GROUP 3	MEDIUM ASSESSMENT AND LOW THERAPEUTIC INT	939004+939002
	MEDIUM ASSESSMENT AND LOW CONSULTATION	939004+939003
	LOW ASSESSMENT AND MEDIUM THERAPEUTIC INT	939001+939005
	LOW ASSESSMENT AND MEDIUM CONSULTATION	939001+939006
	LOW THERAPEUTIC INT AND MEDIUM CONSULTATION	939002+939006
	MEDIUM THERAPEUTIC INT AND LOW CONSULTATION	939005+939003
	LOW ASSESSMENT AND LOW THERAPEUTIC INT AND MEDIUM CONSULTATION	939001+939002+939006
	LOW ASSESSMENT AND MEDIUM THERAPEUTIC INT AND LOW CONSULTATION	939001+939005+939003
	MEDIUM ASSESSMENT AND LOW THERAPEUTIC INT AND LOW CONSULTATION	939004+939002+939003
	LOW ASSESSMENT AND MEDIUM THERAPEUTIC INT AND MEDIUM CONSULTATION	939001+939005+939006
	MEDIUM ASSESSMENT AND LOW THERAPEUTIC INT AND MEDIUM CONSULTATION	939004+939002+939006
	MEDIUM ASSESSMENT AND MEDIUM THERAPEUTIC INT AND LOW CONSULTATION	939004+939005+939003
1154 RESPIRATORY THERAPY GROUP 4	HIGH ASSESSMENT ALONE	939007
	HIGH THERAPEUTIC INT ALONE	939008
	HIGH ASSESSMENT AND LOW THERAPEUTIC INT	939007+939002
	HIGH ASSESSMENT AND LOW CONSULTATION	939007+939003
	LOW ASSESSMENT AND HIGH THERAPEUTIC INT	939001+939008
	HIGH THERAPEUTIC INT AND LOW CONSULTATION	939008+939003
	LOW ASSESSMENT AND HIGH CONSULTATION	939001+939009

ACCS GROUP/DESCN	INTERVENTION DESCRIPTION	INTERVENTION CODE
1154 RESPIRATORY THERAPY GROUP 4 (Cont.)	LOW THERAPEUTIC INT AND HIGH CONSULTATION	939002+939009
	MEDIUM ASSESSMENT AND MEDIUM THERAPEUTIC INT	939004+939005
	MEDIUM ASSESSMENT AND MEDIUM CONSULTATION	939004+939006
	MEDIUM THERAPEUTIC INT AND MEDIUM CONSULTATION	939005+939006
1155 RESPIRATORY THERAPY GROUP 5	HIGH ASSESSMENT AND MEDIUM THERAPEUTIC INT	939007+939005
	HIGH ASSESSMENT AND MEDIUM CONSULTATION	939007+939006
	MEDIUM ASSESSMENT AND HIGH THERAPEUTIC INT	939004+939008
	HIGH THERAPEUTIC INT AND MEDIUM CONSULTATION	939008+939006
	MEDIUM ASSESSMENT AND HIGH CONSULTATION	939004+939009
	MEDIUM THERAPEUTIC INT AND HIGH CONSULTATION	939005+939009
	HIGH ASSESSMENT AND LOW THERAPEUTIC INT AND LOW CONSULTATION	939007+939002+939003
	HIGH ASSESSMENT AND LOW THERAPEUTIC INT AND MEDIUM CONSULTATION	939007+939002+939006
	HIGH ASSESSMENT AND MEDIUM THERAPEUTIC INT AND LOW CONSULTATION	939007+939005+939003
	LOW ASSESSMENT AND HIGH THERAPEUTIC INT AND LOW CONSULTATION	939001+939008+939003
	LOW ASSESSMENT AND HIGH THERAPEUTIC INT AND MEDIUM CONSULTATION	939001+939008+939006
	MEDIUM ASSESSMENT AND HIGH THERAPEUTIC INT AND LOW CONSULTATION	939004+939008+939003
	LOW ASSESSMENT AND LOW THERAPEUTIC INT AND HIGH CONSULTATION	939001+939002+939009
	LOW ASSESSMENT AND MEDIUM THERAPEUTIC INT AND HIGH CONSULTATION	939001+939005+939009
	MEDIUM ASSESSMENT AND LOW THERAPEUTIC INT AND HIGH CONSULTATION	939004+939002+939009
	HIGH ASSESSMENT AND MEDIUM THERAPEUTIC INT AND MEDIUM CONSULTATION	939007+939005+939006
	MEDIUM ASSESSMENT AND HIGH THERAPEUTIC INT AND MEDIUM CONSULTATION	939004+939008+939006
	MEDIUM ASSESSMENT AND MEDIUM THERAPEUTIC INT AND HIGH CONSULTATION	939004+939005+939009
	MEDIUM ASSESSMENT AND MEDIUM THERAPEUTIC INT AND MEDIUM CONSULTATION	939004+939005+939006
1156 RESPIRATORY THERAPY GROUP 6	HIGH ASSESSMENT AND HIGH THERAPEUTIC INT	939007+939008
	HIGH ASSESSMENT AND HIGH CONSULTATION	939007+939009
	HIGH THERAPEUTIC INT AND HIGH CONSULTATION	939008+939009
	HIGH ASSESSMENT AND HIGH THERAPEUTIC INT AND LOW CONSULTATION	939007+939008+939003

ACCS GROUP/DESCN	INTERVENTION DESCRIPTION	INTERVENTION CODE
1156 RESPIRATORY THERAPY GROUP 6 (Cont.)	HIGH ASSESSMENT AND HIGH THERAPEUTIC INT AND MEDIUM CONSULTATION	939007+939008+939006
	HIGH ASSESSMENT AND LOW THERAPEUTIC INT AND HIGH CONSULTATION	939007+939002+939009
	HIGH ASSESSMENT AND MEDIUM THERAPEUTIC INT HIGH CONSULTATION	939007+939005+939009
	LOW ASSESSMENT AND HIGH THERAPEUTIC INT AND HIGH CONSULTATION	939001+939008+939009
	MEDIUM ASSESSMENT AND HIGH THERAPEUTIC INT AND HIGH CONSULTATION	939004+939008+939009
	HIGH ASSESSMENT AND HIGH THERAPEUTIC INT AND HIGH CONSULTATION	939007+939008+939009

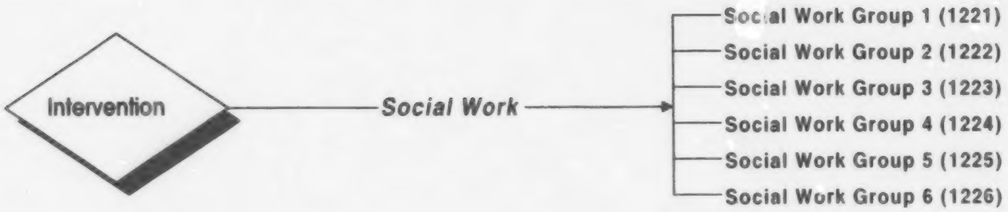
CLINICAL NUTRITION

ACCS GROUP/DESCN	INTERVENTION DESCRIPTION	INTERVENTION CODE
1201 CLINICAL NUTRITION GROUP 1	LOW ASSESSMENT ALONE	893910
	LOW THERAPEUTIC INT ALONE	893902
1202 CLINICAL NUTRITION GROUP 2	MEDIUM ASSESSMENT ALONE	893904
	MEDIUM THERAPEUTIC INT ALONE	893905
	LOW ASSESSMENT AND LOW THERAPEUTIC INT	893910+893902
	LOW ASSESSMENT AND LOW CONSULTATION	893910+893903
	LOW THERAPEUTIC INT AND LOW CONSULTATION	893902+893903
	LOW ASSESSMENT AND LOW THERAPEUTIC INT AND LOW CONSULTATION	893910+893902+893903
1203 CLINICAL NUTRITION GROUP 3	MEDIUM ASSESSMENT AND LOW THERAPEUTIC INT	893904+893902
	MEDIUM ASSESSMENT AND LOW CONSULTATION	893904+893903
	LOW ASSESSMENT AND MEDIUM THERAPEUTIC INT	893910+893905
	LOW ASSESSMENT AND MEDIUM CONSULTATION	893910+893906
	LOW THERAPEUTIC INT AND MEDIUM CONSULTATION	893902+893906
	MEDIUM THERAPEUTIC INT AND LOW CONSULTATION	893905+893903
	LOW ASSESSMENT AND LOW THERAPEUTIC INT AND MEDIUM CONSULTATION	893910+893902+893906
	LOW ASSESSMENT AND MEDIUM THERAPEUTIC INT AND LOW CONSULTATION	893910+893905+893903
	MEDIUM ASSESSMENT AND LOW THERAPEUTIC INT AND LOW CONSULTATION	893904+893902+893903
	LOW ASSESSMENT AND MEDIUM THERAPEUTIC INT AND MEDIUM CONSULTATION	893910+893905+893906
	MEDIUM ASSESSMENT AND LOW THERAPEUTIC INT AND MEDIUM CONSULTATION	893904+893902+893906
	MEDIUM ASSESSMENT AND MEDIUM THERAPEUTIC INT AND LOW CONSULTATION	893904+893905+893903

ACCS GROUP/DESCN	INTERVENTION DESCRIPTION	INTERVENTION CODE
1204 CLINICAL NUTRITION GROUP 4	HIGH ASSESSMENT ALONE	893907
	HIGH THERAPEUTIC INT ALONE	893908
	HIGH ASSESSMENT AND LOW THERAPEUTIC INT	893907+893902
	HIGH ASSESSMENT AND LOW CONSULTATION	893907+893903
	LOW ASSESSMENT AND HIGH THERAPEUTIC INT	893910+893908
	HIGH THERAPEUTIC INT AND LOW CONSULTATION	893908+893903
	LOW ASSESSMENT AND HIGH CONSULTATION	893910+893909
	LOW THERAPEUTIC INT AND HIGH CONSULTATION	893902+893909
	MEDIUM ASSESSMENT AND MEDIUM THERAPEUTIC INT	893904+893905
	MEDIUM ASSESSMENT AND MEDIUM CONSULTATION	893904+893906
	MEDIUM THERAPEUTIC INT AND MEDIUM CONSULTATION	893905+893906
1205 CLINICAL NUTRITION GROUP 5	HIGH ASSESSMENT AND MEDIUM THERAPEUTIC INT	893907+893905
	HIGH ASSESSMENT AND MEDIUM CONSULTATION	893907+893906
	MEDIUM ASSESSMENT AND HIGH THERAPEUTIC INT	893904+893908
	HIGH THERAPEUTIC INT AND MEDIUM CONSULTATION	893908+893906
	MEDIUM ASSESSMENT AND HIGH CONSULTATION	893904+893909
	MEDIUM THERAPEUTIC INT AND HIGH CONSULTATION	893905+893909
	HIGH ASSESSMENT AND LOW THERAPEUTIC INT AND LOW CONSULTATION	893907+893902+893903
	HIGH ASSESSMENT AND LOW THERAPEUTIC INT AND MEDIUM CONSULTATION	893907+893902+893906
	HIGH ASSESSMENT AND MEDIUM THERAPEUTIC INT AND LOW CONSULTATION	893907+893905+893903
	LOW ASSESSMENT AND HIGH THERAPEUTIC INT AND LOW CONSULTATION	893910+893908+893903
	LOW ASSESSMENT AND HIGH THERAPEUTIC INT AND MEDIUM CONSULTATION	893910+893908+893906
	MEDIUM ASSESSMENT AND HIGH THERAPEUTIC INT AND LOW CONSULTATION	893904+893908+893903
	LOW ASSESSMENT AND LOW THERAPEUTIC INT AND HIGH CONSULTATION	893910+893902+893909
	LOW ASSESSMENT AND MEDIUM THERAPEUTIC INT AND HIGH CONSULTATION	893910+893905+893909
	MEDIUM ASSESSMENT AND LOW THERAPEUTIC INT AND HIGH CONSULTATION	893904+893902+893909
	HIGH ASSESSMENT AND MEDIUM THERAPEUTIC INT AND MEDIUM CONSULTATION	893907+893905+893906
	MEDIUM ASSESSMENT AND HIGH THERAPEUTIC INT AND MEDIUM CONSULTATION	893904+893908+893906
	MEDIUM ASSESSMENT AND MEDIUM THERAPEUTIC INT AND HIGH CONSULTATION	893904+893905+893909
	MEDIUM ASSESSMENT AND MEDIUM THERAPEUTIC INT AND MEDIUM CONSULTATION	893904+893905+893906

ACCS GROUP/DESCN	INTERVENTION DESCRIPTION	INTERVENTION CODE
1206 CLINICAL NUTRITION GROUP 6	HIGH ASSESSMENT AND HIGH THERAPEUTIC INT	893907+893908
	HIGH ASSESSMENT AND HIGH CONSULTATION	893907+893909
	HIGH THERAPEUTIC INT AND HIGH CONSULTATION	893908+893909
	HIGH ASSESSMENT AND HIGH THERAPEUTIC INT AND LOW CONSULTATION	893907+893908+893903
	HIGH ASSESSMENT AND HIGH THERAPEUTIC INT AND MEDIUM CONSULTATION	893907+893908+893906
	HIGH ASSESSMENT AND LOW THERAPEUTIC INT AND HIGH CONSULTATION	893907+893902+893909
	HIGH ASSESSMENT AND MEDIUM THERAPEUTIC INT HIGH CONSULTATION	893907+893905+893909
	LOW ASSESSMENT AND HIGH THERAPEUTIC INT AND HIGH CONSULTATION	893910+893908+893909
	MEDIUM ASSESSMENT AND HIGH THERAPEUTIC INT AND HIGH CONSULTATION	893904+893908+893909
	HIGH ASSESSMENT AND HIGH THERAPEUTIC INT AND HIGH CONSULTATION	893907+893908+893909

Social Work Clinical Grouping

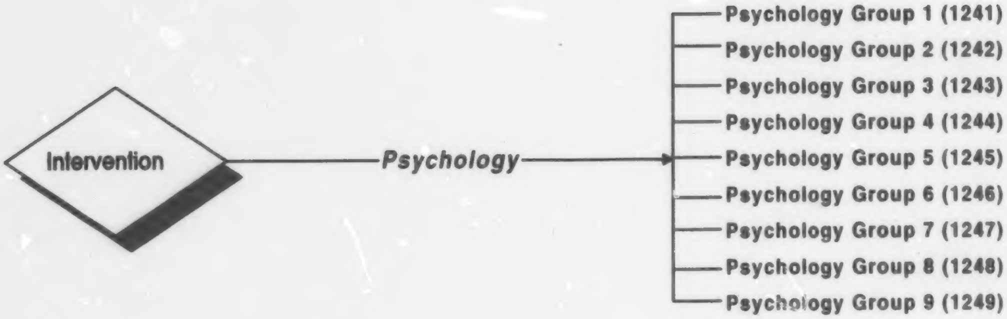

Intervention
Social Work
Social Work Group 1 (1221)
Social Work Group 2 (1222)
Social Work Group 3 (1223)
Social Work Group 4 (1224)
Social Work Group 5 (1225)
Social Work Group 6 (1226)

Social Work

ACCS GROUP/DESCN	INTERVENTION DESCRIPTION	INTERVENTION CODE
1221 SOCIAL WORK GROUP 1	LOW ASSESSMENT ALONE	941001
	LOW THERAPEUTIC INT ALONE	941002
1222 SOCIAL WORK GROUP 2	MEDIUM ASSESSMENT ALONE	941004
	MEDIUM THERAPEUTIC INT ALONE	941005
	LOW ASSESSMENT AND LOW THERAPEUTIC INT	941001+941002
	LOW ASSESSMENT AND LOW CONSULTATION	941001+941003
	LOW THERAPEUTIC INT AND LOW CONSULTATION	941002+941003
	LOW ASSESSMENT AND LOW THERAPEUTIC INT AND LOW CONSULTATION	941001+941002+941003
1223 SOCIAL WORK GROUP 3	MEDIUM ASSESSMENT AND LOW THERAPEUTIC INT	941004+941002
	MEDIUM ASSESSMENT AND LOW CONSULTATION	941004+941003
	LOW ASSESSMENT AND MEDIUM THERAPEUTIC INT	941001+941005
	LOW ASSESSMENT AND MEDIUM CONSULTATION	941001+941006
	LOW THERAPEUTIC INT AND MEDIUM CONSULTATION	941002+941006
	MEDIUM THERAPEUTIC INT AND LOW CONSULTATION	941005+941003
	LOW ASSESSMENT AND LOW THERAPEUTIC INT AND MEDIUM CONSULTATION	941001+941002+941006
	LOW ASSESSMENT AND MEDIUM THERAPEUTIC INT AND LOW CONSULTATION	941001+941005+941003
	MEDIUM ASSESSMENT AND LOW THERAPEUTIC INT AND LOW CONSULTATION	941004+941002+941003
	LOW ASSESSMENT AND MEDIUM THERAPEUTIC INT AND MEDIUM CONSULTATION	941001+941005+941006
	MEDIUM ASSESSMENT AND LOW THERAPEUTIC INT AND MEDIUM CONSULTATION	941004+941002+941006
	MEDIUM ASSESSMENT AND MEDIUM THERAPEUTIC INT AND LOW CONSULTATION	941004+941005+941003
1224 SOCIAL WORK GROUP 4	HIGH ASSESSMENT ALONE	941007
	HIGH THERAPEUTIC INT ALONE	941008
	HIGH ASSESSMENT AND LOW THERAPEUTIC INT	941007+941002
	HIGH ASSESSMENT AND LOW CONSULTATION	941007+941003
	LOW ASSESSMENT AND HIGH THERAPEUTIC INT	941001+941008
	HIGH THERAPEUTIC INT AND LOW CONSULTATION	941008+941003
	LOW ASSESSMENT AND HIGH CONSULTATION	941001+941009
	LOW THERAPEUTIC INT AND HIGH CONSULTATION	941002+941009
	MEDIUM ASSESSMENT AND MEDIUM THERAPEUTIC INT	941004+941005
	MEDIUM ASSESSMENT AND MEDIUM CONSULTATION	941004+941006
	MEDIUM THERAPEUTIC INT AND MEDIUM CONSULTATION	941005+941006
1225 SOCIAL WORK GROUP 5	HIGH ASSESSMENT AND MEDIUM THERAPEUTIC INT	941007+941005
	HIGH ASSESSMENT AND MEDIUM CONSULTATION	941007+941006
	MEDIUM ASSESSMENT AND HIGH THERAPEUTIC INT	941004+941008
	HIGH THERAPEUTIC INT AND MEDIUM CONSULTATION	941008+941006
	MEDIUM ASSESSMENT AND HIGH CONSULTATION	941004+941009

ACCS GROUP/DESCN	INTERVENTION DESCRIPTION	INTERVENTION CODE
1225 SOCIAL WORK GROUP 5 (Cont)	MEDIUM THERAPEUTIC INT AND HIGH CONSULTATION	941005+941009
	HIGH ASSESSMENT AND LOW THERAPEUTIC INT AND LOW CONSULTATION	941007+941002+941003
	HIGH ASSESSMENT AND LOW THERAPEUTIC INT AND MEDIUM CONSULTATION	941007+941002+941006
	HIGH ASSESSMENT AND MEDIUM THERAPEUTIC INT AND LOW CONSULTATION	941007+941005+941003
	LOW ASSESSMENT AND HIGH THERAPEUTIC INT AND LOW CONSULTATION	941001+941008+941003
	LOW ASSESSMENT AND HIGH THERAPEUTIC INT AND MEDIUM CONSULTATION	941001+941008+941006
	MEDIUM ASSESSMENT AND HIGH THERAPEUTIC INT AND LOW CONSULTATION	941004+941008+941003
	LOW ASSESSMENT AND LOW THERAPEUTIC INT AND HIGH CONSULTATION	941001+941002+941009
	LOW ASSESSMENT AND MEDIUM THERAPEUTIC INT AND HIGH CONSULTATION	941001+941005+941009
	MEDIUM ASSESSMENT AND LOW THERAPEUTIC INT AND HIGH CONSULTATION	941004+941002+941009
	HIGH ASSESSMENT AND MEDIUM THERAPEUTIC INT AND MEDIUM CONSULTATION	941007+941005+941006
	MEDIUM ASSESSMENT AND HIGH THERAPEUTIC INT AND MEDIUM CONSULTATION	941004+941008+941006
	MEDIUM ASSESSMENT AND MEDIUM THERAPEUTIC INT AND HIGH CONSULTATION	941004+941005+941009
	MEDIUM ASSESSMENT AND MEDIUM THERAPEUTIC INT AND MEDIUM CONSULTATION	941004+941005+941006
1226 SOCIAL WORK GROUP 6	HIGH ASSESSMENT AND HIGH THERAPEUTIC INT	941007+941008
	HIGH ASSESSMENT AND HIGH CONSULTATION	941007+941009
	HIGH THERAPEUTIC INT AND HIGH CONSULTATION	941008+941009
	HIGH ASSESSMENT AND HIGH THERAPEUTIC INT AND LOW CONSULTATION	941007+941008+941003
	HIGH ASSESSMENT AND HIGH THERAPEUTIC INT AND MEDIUM CONSULTATION	941007+941008+941006
	HIGH ASSESSMENT AND LOW THERAPEUTIC INT AND HIGH CONSULTATION	941007+941002+941009
	HIGH ASSESSMENT AND MEDIUM THERAPEUTIC INT HIGH CONSULTATION	941007+941005+941009
	LOW ASSESSMENT AND HIGH THERAPEUTIC INT AND HIGH CONSULTATION	941001+941008+941009
	MEDIUM ASSESSMENT AND HIGH THERAPEUTIC INT AND HIGH CONSULTATION	941004+941008+941009
	HIGH ASSESSMENT AND HIGH THERAPEUTIC INT AND HIGH CONSULTATION	941007+941008+941009

Psychology (Rehabilitation)
Clinical Grouping


Intervention
Psychology
Psychology Group 1 (1241)
Psychology Group 2 (1242)
Psychology Group 3 (1243)
Psychology Group 4 (1244)
Psychology Group 5 (1245)
Psychology Group 6 (1246)
Psychology Group 7 (1247)
Psychology Group 8 (1248)
Psychology Group 9 (1249)

ACCS Grouper
04/98

PSYCHOLOGY (REHABILITATION)

ACCS GROUP/DESCN	INTERVENTION DESCRIPTION	INTERVENTION CODE
1241 PSYCHOLOGY GROUP 1	LOW ASSESSMENT ALONE	942001
	LOW THERAPEUTIC INT ALONE	942002
1242 PSYCHOLOGY GROUP 2	MEDIUM ASSESSMENT ALONE	942004
	MEDIUM THERAPEUTIC INT ALONE	942005
	LOW ASSESSMENT AND LOW THERAPEUTIC INT	942001+942002
	LOW ASSESSMENT AND LOW CONSULTATION	942001+942003
	LOW THERAPEUTIC INT AND LOW CONSULTATION	942002+942003
	LOW ASSESSMENT AND LOW THERAPEUTIC INT AND LOW CONSULTATION	942001+942002+942003
1243 PSYCHOLOGY GROUP 3	MEDIUM ASSESSMENT AND LOW THERAPEUTIC INT	942004+942002
	MEDIUM ASSESSMENT AND LOW CONSULTATION	942004+942003
	LOW ASSESSMENT AND MEDIUM THERAPEUTIC INT	942001+942005
	LOW ASSESSMENT AND MEDIUM CONSULTATION	942001+942006
	LOW THERAPEUTIC INT AND MEDIUM CONSULTATION	942002+942006
	MEDIUM THERAPEUTIC INT AND LOW CONSULTATION	942005+942003
	LOW ASSESSMENT AND LOW THERAPEUTIC INT AND MEDIUM CONSULTATION	942001+942002+942006
	LOW ASSESSMENT AND MEDIUM THERAPEUTIC INT AND LOW CONSULTATION	942001+942005+942003
	MEDIUM ASSESSMENT AND LOW THERAPEUTIC INT AND LOW CONSULTATION	942004+942002+942003
	LOW ASSESSMENT AND MEDIUM THERAPEUTIC INT AND MEDIUM CONSULTATION	942001+942005+942006
	MEDIUM ASSESSMENT AND LOW THERAPEUTIC INT AND MEDIUM CONSULTATION	942004+942002+942006
	MEDIUM ASSESSMENT AND MEDIUM THERAPEUTIC INT AND LOW CONSULTATION	942004+942005+942003
1244 PSYCHOLOGY GROUP 4	HIGH ASSESSMENT ALONE	942007
	HIGH THERAPEUTIC INT ALONE	942008
	HIGH ASSESSMENT AND LOW THERAPEUTIC INT	942007+942002
	HIGH ASSESSMENT AND LOW CONSULTATION	942007+942003
	LOW ASSESSMENT AND HIGH THERAPEUTIC INT	942001+942008
	HIGH THERAPEUTIC INT AND LOW CONSULTATION	942008+942003
	LOW ASSESSMENT AND HIGH CONSULTATION	942001+942009
	LOW THERAPEUTIC INT AND HIGH CONSULTATION	942002+942009
	MEDIUM ASSESSMENT AND MEDIUM THERAPEUTIC INT	942004+942005
	MEDIUM ASSESSMENT AND MEDIUM CONSULTATION	942004+942006
	MEDIUM THERAPEUTIC INT AND MEDIUM CONSULTATION	942005+942006
1245 PSYCHOLOGY GROUP 5	HIGH ASSESSMENT AND MEDIUM THERAPEUTIC INT	942007+942005
	HIGH ASSESSMENT AND MEDIUM CONSULTATION	942007+942006
	MEDIUM ASSESSMENT AND HIGH THERAPEUTIC INT	942004+942008
	HIGH THERAPEUTIC INT AND MEDIUM CONSULTATION	942008+942006
	MEDIUM ASSESSMENT AND HIGH CONSULTATION	942004+942009

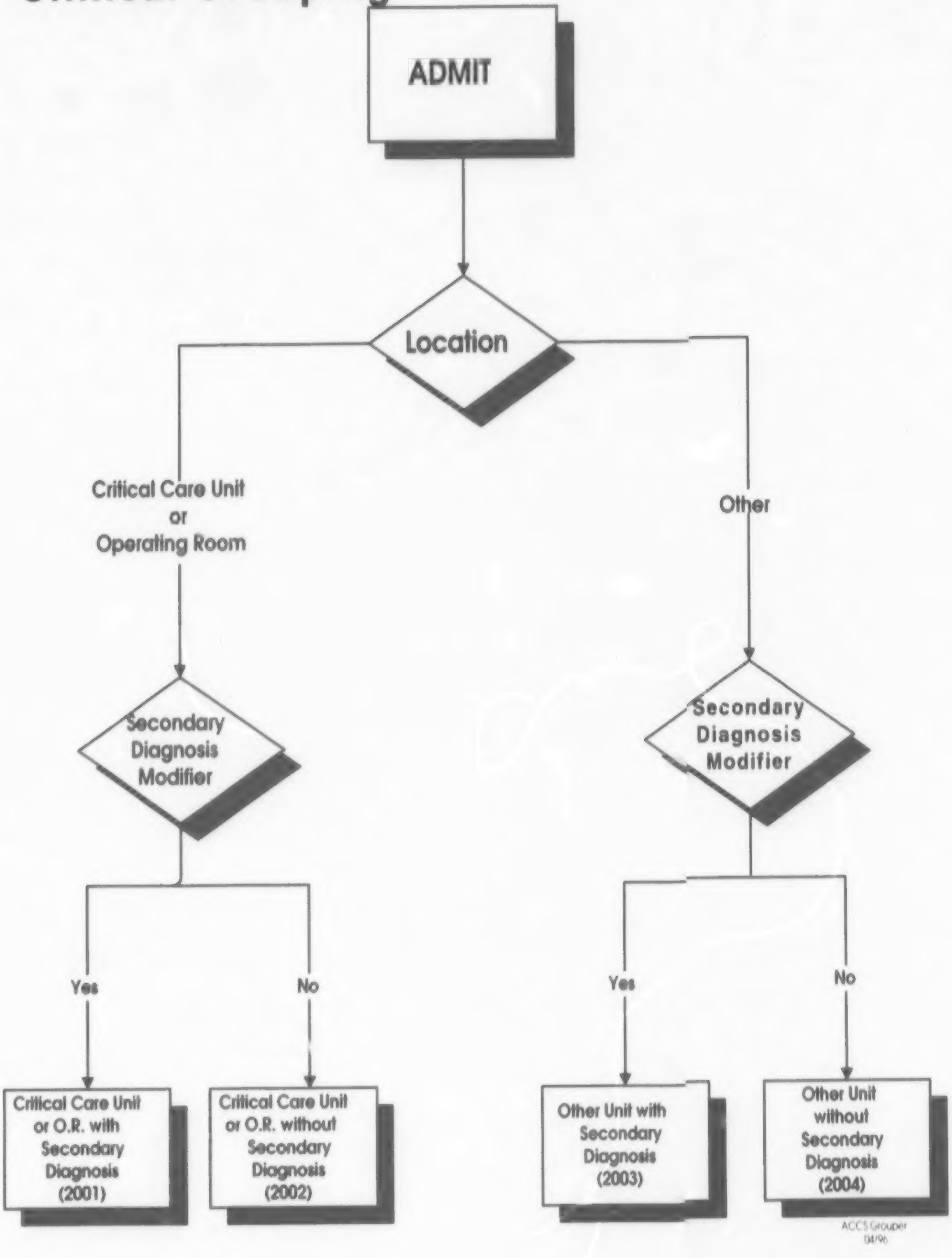
ACCS GROUP/DESCN	INTERVENTION DESCRIPTION	INTERVENTION CODE
1245 PSYCHOLOGY GROUP 5 (Cont.)	MEDIUM THERAPEUTIC INT AND HIGH CONSULTATION	942005+942009
	HIGH ASSESSMENT AND LOW THERAPEUTIC INT AND LOW CONSULTATION	942007+942002+942003
	HIGH ASSESSMENT AND LOW THERAPEUTIC INT AND MEDIUM CONSULTATION	942007+942002+942006
	HIGH ASSESSMENT AND MEDIUM THERAPEUTIC INT AND LOW CONSULTATION	942007+942005+942003
	LOW ASSESSMENT AND HIGH THERAPEUTIC INT AND LOW CONSULTATION	942001+942008+942003
	LOW ASSESSMENT AND HIGH THERAPEUTIC INT AND MEDIUM CONSULTATION	942001+942008+942006
	MEDIUM ASSESSMENT AND HIGH THERAPEUTIC INT AND LOW CONSULTATION	942004+942008+942003
	LOW ASSESSMENT AND LOW THERAPEUTIC INT AND HIGH CONSULTATION	942001+942002+942009
	LOW ASSESSMENT AND MEDIUM THERAPEUTIC INT AND HIGH CONSULTATION	942001+942005+942009
	MEDIUM ASSESSMENT AND LOW THERAPEUTIC INT AND HIGH CONSULTATION	942004+942002+942009
	HIGH ASSESSMENT AND MEDIUM THERAPEUTIC INT AND MEDIUM CONSULTATION	942007+942005+942006
	MEDIUM ASSESSMENT AND HIGH THERAPEUTIC INT AND MEDIUM CONSULTATION	942004+942008+942006
	MEDIUM ASSESSMENT AND MEDIUM THERAPEUTIC INT AND HIGH CONSULTATION	942004+942005+942009
	MEDIUM ASSESSMENT AND MEDIUM THERAPEUTIC INT AND MEDIUM CONSULTATION	942004+942005+942006
1246 PSYCHOLOGY GROUP 6	HIGH ASSESSMENT AND HIGH THERAPEUTIC INT	942007+942008
	HIGH ASSESSMENT AND HIGH CONSULTATION	942007+942009
	HIGH THERAPEUTIC INT AND HIGH CONSULTATION	942008+942009
	HIGH ASSESSMENT AND HIGH THERAPEUTIC INT AND LOW CONSULTATION	942007+942008+942003
	HIGH ASSESSMENT AND HIGH THERAPEUTIC INT AND MEDIUM CONSULTATION	942007+942008+942006
	HIGH ASSESSMENT AND LOW THERAPEUTIC INT AND HIGH CONSULTATION	942007+942002+942009
	HIGH ASSESSMENT AND MEDIUM THERAPEUTIC INT HIGH CONSULTATION	942007+942005+942009
	LOW ASSESSMENT AND HIGH THERAPEUTIC INT AND HIGH CONSULTATION	942001+942008+942009
	MEDIUM ASSESSMENT AND HIGH THERAPEUTIC INT AND HIGH CONSULTATION	942004+942008+942009
	HIGH ASSESSMENT AND HIGH THERAPEUTIC INT AND HIGH CONSULTATION	942007+942008+942009

ACCS GROUP/DESCN	INTERVENTION DESCRIPTION	INTERVENTION CODE
1247 PSYCHOLOGY GROUP 7	NEUROPSYCHOLOGICAL TESTING TYPE 1 (<2 HOURS)	942017
	NEUROPSYCHOLOGICAL TESTING TYPE 1 (<2 HOURS) AND LOW CONSULTATION	942017+942003
	NEUROPSYCHOLOGICAL TESTING TYPE 1 (<2 HOURS) AND MEDIUM THERAPEUTIC INT	942017+942006
	NEUROPSYCHOLOGICAL TESTING TYPE 1 (<2 HOURS) AND HIGH MEDIUM THERAPEUTIC INT	942017+942009
	NEUROPSYCHOLOGICAL TESTING TYPE 1 (<2 HOURS) AND LOW ASSESSMENT	942017+942001
	NEUROPSYCHOLOGICAL TESTING TYPE 1 (<2 HOURS) AND LOW ASSESSMENT AND LOW CONSULTATION	942017+942001+942003
	NEUROPSYCHOLOGICAL TESTING TYPE 1 (<2 HOURS) AND LOW ASSESSMENT AND MEDIUM CONSULTATION	942017+942001+942006
	NEUROPSYCHOLOGICAL TESTING TYPE 1 (<2 HOURS) AND LOW ASSESSMENT AND HIGH CONSULTATION	942017+942001+942009
	NEUROPSYCHOLOGICAL TESTING TYPE 1 (<2 HOURS) AND MEDIUM ASSESSMENT	942017+942004
	NEUROPSYCHOLOGICAL TESTING TYPE 1 (<2 HOURS) AND MEDIUM ASSESSMENT AND LOW CONSULTATION	942017+942004+942003
	NEUROPSYCHOLOGICAL TESTING TYPE 1 (<2 HOURS) AND MEDIUM ASSESSMENT AND MEDIUM CONSULTATION	942017+942004+942006
	NEUROPSYCHOLOGICAL TESTING TYPE 1 (<2 HOURS) AND MEDIUM ASSESSMENT AND HIGH CONSULTATION	942017+942004+942009
	NEUROPSYCHOLOGICAL TESTING TYPE 1 (<2 HOURS) AND HIGH ASSESSMENT	942017+942007
	NEUROPSYCHOLOGICAL TESTING TYPE 1 (<2 HOURS) AND HIGH ASSESSMENT AND LOW CONSULTATION	942017+942007+942003
	NEUROPSYCHOLOGICAL TESTING TYPE 1 (<2 HOURS) AND HIGH ASSESSMENT AND MEDIUM CONSULTATION	942017+942007+942006
	NEUROPSYCHOLOGICAL TESTING TYPE 1 (<2 HOURS) AND HIGH ASSESSMENT AND HIGH CONSULTATION	942017+942007+942009
	NEUROPSYCHOLOGICAL TESTING TYPE 1 (<2 HOURS) AND LOW THERAPEUTIC INT	942017+942002
	NEUROPSYCHOLOGICAL TESTING TYPE 1 (<2 HOURS) AND LOW THERAPEUTIC INT AND LOW CONSULTATION	942017+942002+942003
	NEUROPSYCHOLOGICAL TESTING TYPE 1 (<2 HOURS) AND LOW THERAPEUTIC INT AND MEDIUM CONSULTATION	942017+942002+942006
	NEUROPSYCHOLOGICAL TESTING TYPE 1 (<2 HOURS) AND LOW THERAPEUTIC INT AND HIGH CONSULTATION	942017+942002+942009
	NEUROPSYCHOLOGICAL TESTING TYPE 1 (<2 HOURS) AND MEDIUM THERAPEUTIC INT	942017+942005
	NEUROPSYCHOLOGICAL TESTING TYPE 1 (<2 HOURS) AND MEDIUM THERAPEUTIC INT AND LOW CONSULTATION	942017+942005+942003

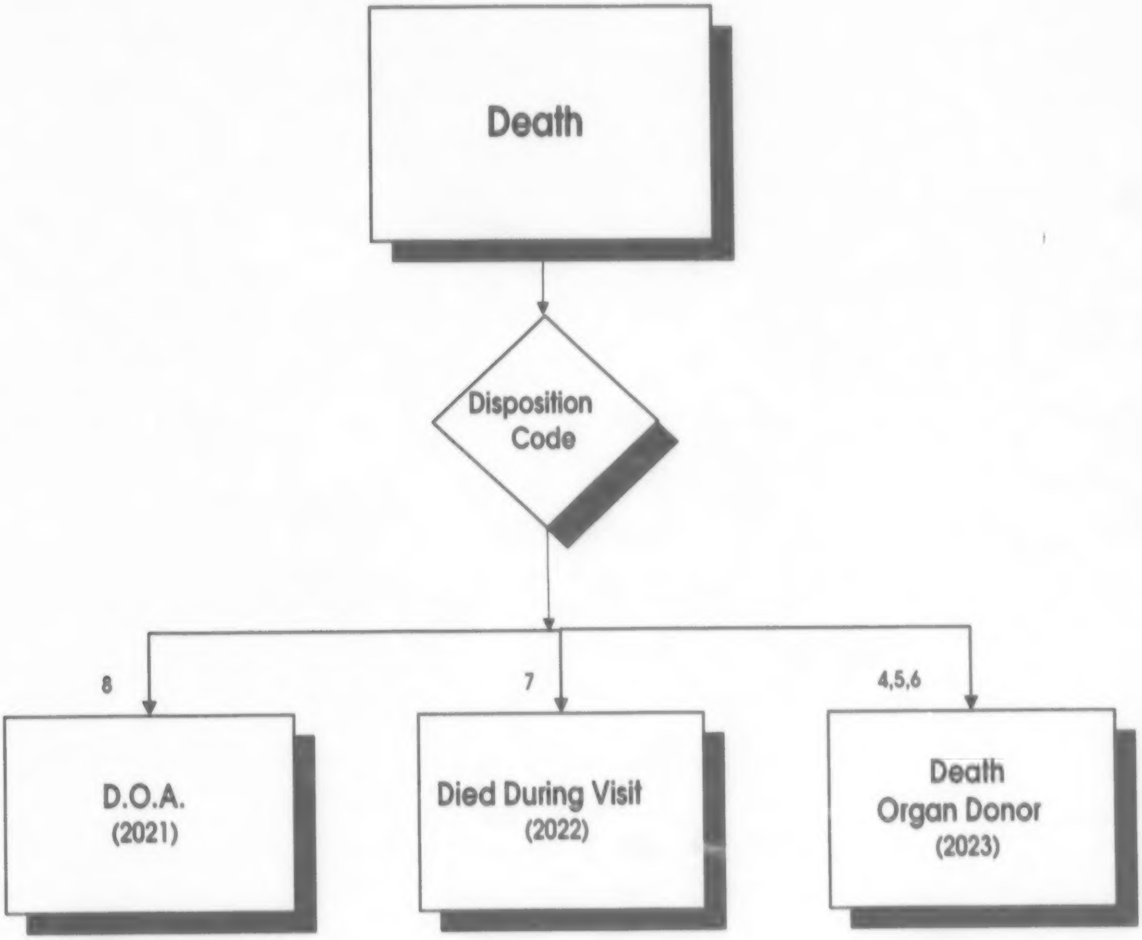
ACCS GROUP/DESCN	INTERVENTION DESCRIPTION	INTERVENTION CODE
1247 PSYCHOLOGY Group 7 (Cont.)	NEUROPSYCHOLOGICAL TESTING TYPE 1 (<2 HOURS) AND MEDIUM THERAPEUTIC INT AND MEDIUM CONSULTATION	942017+942005+942006
	NEUROPSYCHOLOGICAL TESTING TYPE 1 (<2 HOURS) AND MEDIUM THERAPEUTIC INT AND HIGH CONSULTATION	942017+942005+942009
	NEUROPSYCHOLOGICAL TESTING TYPE 1 (<2 HOURS) AND HIGH THERAPEUTIC INT	942017+942008
	NEUROPSYCHOLOGICAL TESTING TYPE 1 (<2 HOURS) AND HIGH THERAPEUTIC INT AND LOW CONSULTATION	942017+942008+942003
	NEUROPSYCHOLOGICAL TESTING TYPE 1 (<2 HOURS) AND HIGH THERAPEUTIC INT AND MEDIUM CONSULTATION	942017+942008+942006
	NEUROPSYCHOLOGICAL TESTING TYPE 1 (<2 HOURS) AND HIGH THERAPEUTIC INT AND HIGH CONSULTATION	942017+942008+942009
1248 PSYCHOLOGY GROUP 8	NEUROPSYCHOLOGICAL TESTING (HALF DAY)	942018
	NEUROPSYCHOLOGICAL TESTING (HALF DAY) AND LOW CONSULTATION	942018+942003
	NEUROPSYCHOLOGICAL TESTING (HALF DAY) AND MEDIUM CONSULTATION	942018+942006
	NEUROPSYCHOLOGICAL TESTING (HALF DAY) AND HIGH CONSULTATION	942018+942009
	NEUROPSYCHOLOGICAL TESTING (HALF DAY) AND LOW ASSESSMENT	942018+942001
	NEUROPSYCHOLOGICAL TESTING (HALF DAY) AND LOW ASSESSMENT AND LOW CONSULTATION	942018+942001+942003
	NEUROPSYCHOLOGICAL TESTING (HALF DAY) AND LOW ASSESSMENT AND MEDIUM CONSULTATION	942018+942001+942006
	NEUROPSYCHOLOGICAL TESTING (HALF DAY) AND LOW ASSESSMENT AND HIGH CONSULTATION	942018+942001+942009
	NEUROPSYCHOLOGICAL TESTING (HALF DAY) AND MEDIUM ASSESSMENT	942018+942004
	NEUROPSYCHOLOGICAL TESTING (HALF DAY) AND MEDIUM ASSESSMENT AND LOW CONSULTATION	942018+942004+942003
	NEUROPSYCHOLOGICAL TESTING (HALF DAY) AND MEDIUM THERAPEUTIC INT AND MEDIUM CONSULTATION	942018+942004+942006
	NEUROPSYCHOLOGICAL TESTING (HALF DAY) AND MEDIUM THERAPEUTIC INT AND HIGH CONSULTATION	942018+942004+942009
	NEUROPSYCHOLOGICAL TESTING (HALF DAY) AND HIGH ASSESSMENT	942018+942007
	NEUROPSYCHOLOGICAL TESTING (HALF DAY) AND HIGH ASSESSMENT AND LOW CONSULTATION	942018+942007+942003
	NEUROPSYCHOLOGICAL TESTING (HALF DAY) AND HIGH ASSESSMENT AND MEDIUM CONSULTATION	942018+942007+942006
	NEUROPSYCHOLOGICAL TESTING (HALF DAY) AND HIGH ASSESSMENT AND HIGH CONSULTATION	942018+942007+942009

ACCS GROUP/DESCN	INTERVENTION DESCRIPTION	INTERVENTION CODE
1248 PSYCHOLOGY GROUP 8 (Cont.)	NEUROPSYCHOLOGICAL TESTING (HALF DAY) AND LOW THERAPEUTIC INT	942018+942002
	NEUROPSYCHOLOGICAL TESTING (HALF DAY) AND LOW THERAPEUTIC INT AND LOW CONSULTATION	942018+942002+942003
	NEUROPSYCHOLOGICAL TESTING (HALF DAY) AND LOW THERAPEUTIC INT AND MEDIUM CONSULTATION	942018+942002+942006
	NEUROPSYCHOLOGICAL TESTING (HALF DAY) AND LOW THERAPEUTIC INT AND HIGH CONSULTATION	942018+942002+942009
	NEUROPSYCHOLOGICAL TESTING (HALF DAY) AND MEDIUM THERAPEUTIC INT	942018+942005
	NEUROPSYCHOLOGICAL TESTING (HALF DAY) AND MEDIUM THERAPEUTIC INT AND LOW CONSULTATION	942018+942005+942003
	NEUROPSYCHOLOGICAL TESTING (HALF DAY) AND MEDIUM THERAPEUTIC INT AND MEDIUM CONSULTATION	942018+942008+942006
	NEUROPSYCHOLOGICAL TESTING (HALF DAY) AND MEDIUM THERAPEUTIC INT AND HIGH CONSULTATION	942018+942005+942009
	NEUROPSYCHOLOGICAL TESTING (HALF DAY) AND HIGH THERAPEUTIC INT	942018+942008
	NEUROPSYCHOLOGICAL TESTING (HALF DAY) AND HIGH THERAPEUTIC INT AND LOW CONSULTATION	942018+942008+942003
	NEUROPSYCHOLOGICAL TESTING (HALF DAY) AND HIGH THERAPEUTIC INT AND MEDIUM CONSULTATION	942018+942008+942006
	NEUROPSYCHOLOGICAL TESTING (HALF DAY) AND HIGH THERAPEUTIC INT AND HIGH CONSULTATION	942018+942008+942009
1249 PSYCHOLOGY GROUP 9	NEUROPSYCHOLOGICAL TESTING (FULL DAY)	942019
	NEUROPSYCHOLOGICAL TESTING (FULL DAY) AND LOW CONSULTATION	942019+942003
	NEUROPSYCHOLOGICAL TESTING (FULL DAY) AND MEDIUM CONSULTATION	942019+942006
	NEUROPSYCHOLOGICAL TESTING (FULL DAY) AND LOW CONSULTATION	942019+942009

Admitted Service Recipient
Clinical Grouping


ADMIT
Location
Critical Care Unit or Operating Room
Other
Secondary Diagnosis Modifier
Secondary Diagnosis Modifier
Yes
No
Yes
No
Critical Care Unit or O.R. with Secondary Diagnosis (2001)
Critical Care Unit or O.R. without Secondary Diagnosis (2002)
Other Unit with Secondary Diagnosis (2003)
Other Unit without Secondary Diagnosis (2004)
ACCS Grouper 04/96

Deceased Service Recipient Clinical Grouping

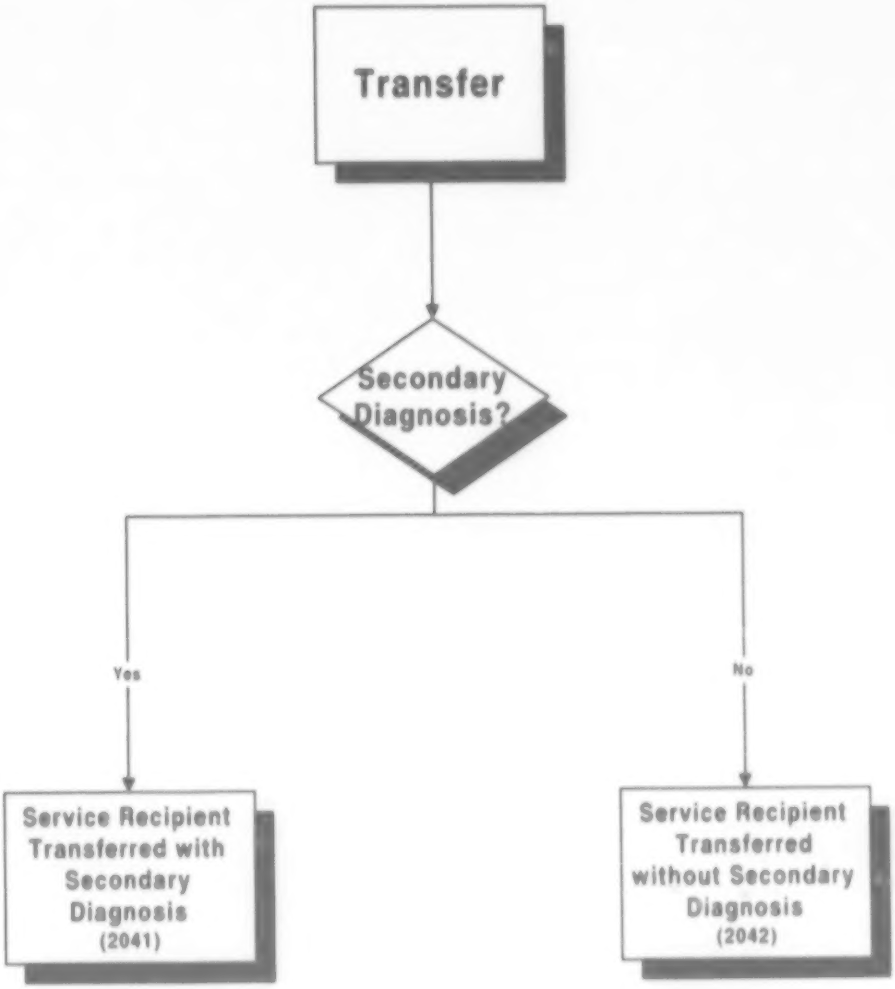

Death
Disposition Code
8
7
4,5,6
D.O.A. (2021)
Died During Visit (2022)
Death Organ Donor (2023)

ACCS Grouper
04/00

ACCS CELL
2023 Death – Organ Donor Code

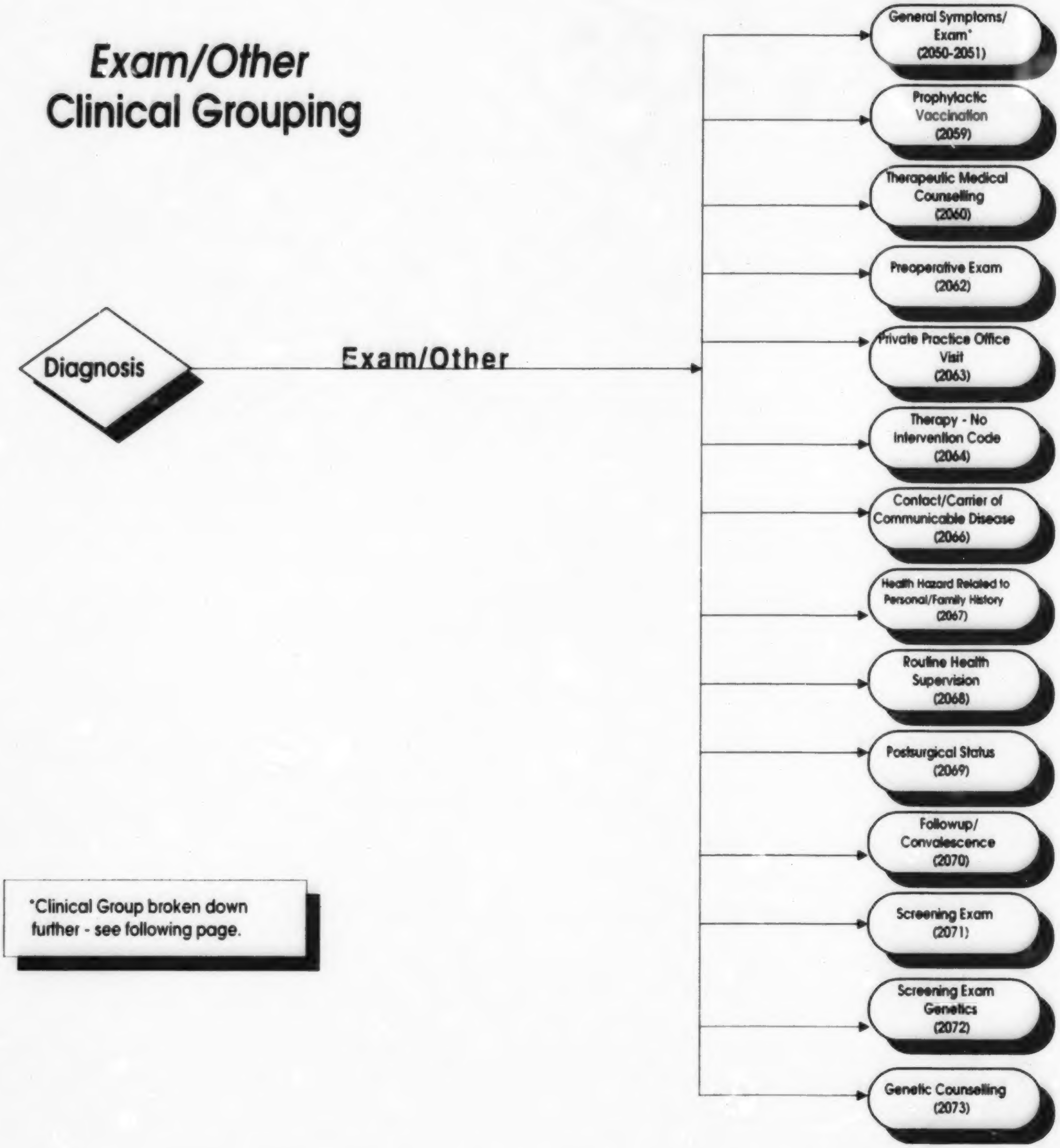
ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
2023 DEATH – ORGAN DONOR		
	7796	TERMINATION PREGNANCY (FETUS)
	7980	SUDDEN INFANT DEATH SYNDROME
	7981	INSTANTANEOUS DEATH
	7982	DEATH LESS 24 HOURS ONSET SYMPT
	7989	UNATTENDED DEATH

Transferred Service Recipient
Clinical Grouping


Transfer
Secondary Diagnosis?
Yes
No
Service Recipient Transferred with Secondary Diagnosis (2041)
Service Recipient Transferred without Secondary Diagnosis (2042)

ACCS Grouper
04/96

Exam/Other
Clinical Grouping

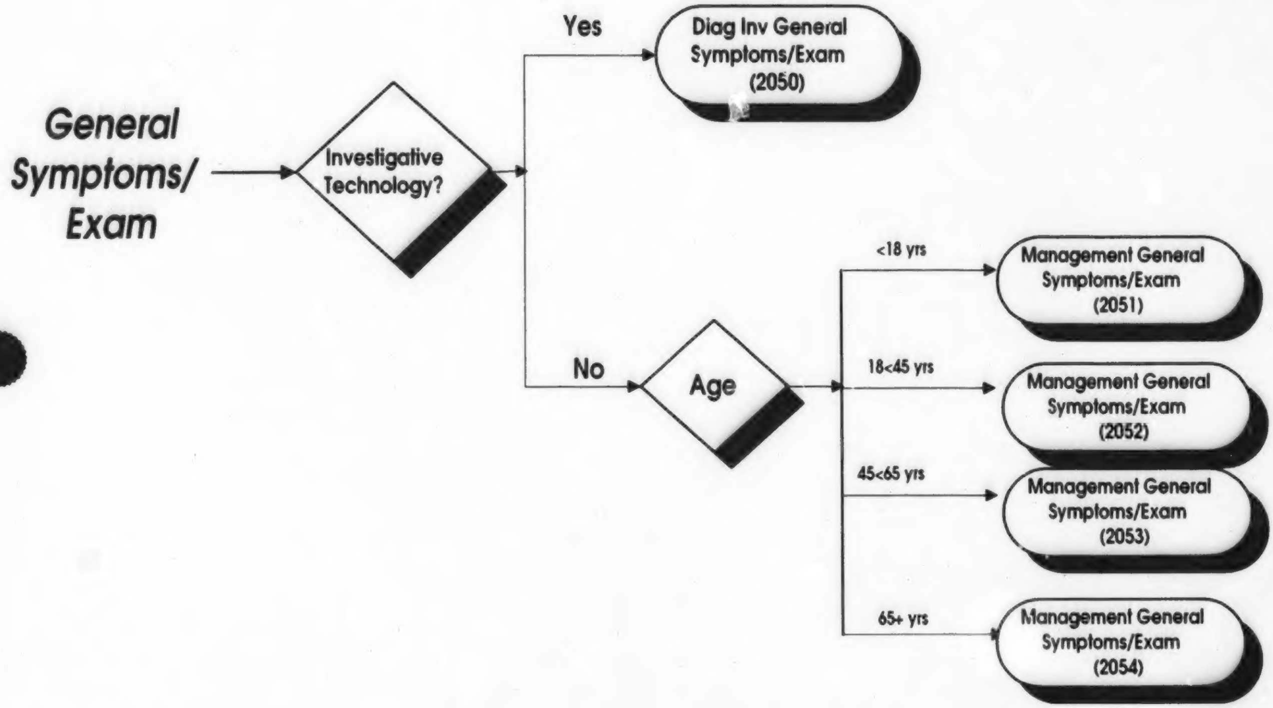

Diagnosis
Exam/Other
General Symptoms/ Exam* (2050-2051)
Prophylactic Vaccination (2059)
Therapeutic Medical Counselling (2060)
Preoperative Exam (2062)
Private Practice Office Visit (2063)
Therapy - No Intervention Code (2064)
Contact/Carrier of Communicable Disease (2066)
Health Hazard Related to Personal/Family History (2067)
Routine Health Supervision (2068)
Postsurgical Status (2069)
Followup/ Convalescence (2070)
Screening Exam (2071)
Screening Exam Genetics (2072)
Genetic Counselling (2073)

*Clinical Group broken down further - see following page.

ACCS Grouper
04/00

F8

Exam/Other Clinical Grouping


General Symptoms/ Exam
Investigative Technology?
Yes
Diag Inv General Symptoms/Exam (2050)
No
Age
<18 yrs
Management General Symptoms/Exam (2051)
18<45 yrs
Management General Symptoms/Exam (2052)
45<65 yrs
Management General Symptoms/Exam (2053)
65+ yrs
Management General Symptoms/Exam (2054)

ACCS Grouper
04/00

ACCS CELL
2050-2051 Gen Symptoms/Exam

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
2050-2054 DIAG INV & MANAGEMENT GENERAL SYMPTOMS/EXAM		
	78071	CHRONIC FATIGUE SYNDROME
	78079	OTHER MALAISE AND FATIQUE
	7809	OTHER GENERAL SYMPTOMS
	7823	EDEMA
	78261	PALLOR
	78262	FLUSHING
	7868	HICCOUGH
	7869	OTH SYMPT RESPIRATORY SYS/CHEST
	7873	FLATULENCE/ERUCTATION/GAS PAIN
	7901	ELEVATED SEDIMENTATION RATE
	7902	ABNORMAL GLUCOSE TOLERANCE TEST
	7904	NONSPEC ELEVAT TRANSAMINASE/LDH
	7905	OTH NONSPEC ABNORM SERUM ENZYME
	7906	OTHER ABNORMAL BLOOD CHEMISTRY
	79091	ABNORMAL ARTERIAL BLOOD GASES
	79092	ABNORMAL COAGULATION PROFILE
	79093	ELEVAT PROSTATE SPECIF ANTIGEN
	79094	EUTHYROID SICK SYNDROME
	79099	OTH NONSPEC FINDINGS EXAM BLOOD
	7911	CHYLURIA
	7920	ABNORM FIND CEREBROSPINAL FLUID
	7921	ABNORM FINDINGS STOOL CONTENTS
	7924	ABNORMAL FINDINGS IN SALIVA
	7929	NONSPEC ABNORM FIND OTHER SUBST
	7930	NONSPEC ABNORM FIND SKULL/HEAD
	7931	NONSPEC ABNORM FIND LUNG FIELD
	7932	ABNORM FIND OTH INTRATHORAC ORG
	7934	NONSPEC ABNORM FINDING GI TRACT
	7936	ABNORM FIND ABDOM AREA/RETROPER
	7937	ABNORM FIND MUSCULOSKELETAL SYS
	7939	OTH ABNORMAL FIND XRAY/OTH EXAM
	79400	ABNORM FUNC STUDY BRAIN/CNS NOS
	79401	ABNORMAL ECHOENCEPHALOGRAM
	79402	ABNORMAL ELECTROENCEPHALOGRAM
	79409	OTH ABNORM FUNC STUDY BRAIN/CNS
	79410	ABNORM RESPONSE NERV STIMUL NOS
	79419	OTH ABNORM FUNC PERIPH NERV/SEN
	7942	NONSPEC ABNORM PULMONARY FUNCT
	79430	ABNORM CARDVASC FUNCT STUDY NOS
	79431	ABNORMAL ELECTROCARDIOGRAM
	79439	OTH ABNORM CARDVASC FUNCT STUDY
	7954	OTH NONSPEC ABNORM HISTOLOGICAL
	7955	NONSPEC RXN TB TEST NO ACTIV TB
	7956	FALSE POS SEROL TEST SYPHILIS
	79579	OTH NONSPEC IMMUNOLOGICAL FIND
	7961	ABNORMAL REFLEX
	7964	OTH ABNORMAL CLINICAL FINDINGS
	7969	OTH NONSPECIFIC ABNORM FINDINGS
	7993	DEBILITY UNSPECIFIED
	7998	OTHER ILL-DEFINED CONDITIONS
	7999	OTH UNKN/UNSPEC CAUSE MORB/MORT
	9999	OTH/NOS COMPL MEDICAL CARE NEC

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
2050-2054 DIAG INV & MANAGEMENT GENERAL SYMPTOMS/EXAM		
	V468	DEPENDENCE ON OTH ENABLING MACH
	V469	DEPENDENCE ON UNSPEC MACHINE
	V470	DEFICIENCES OF INTERNAL ORGANS
	V471	MECH/MOTOR PROBLEMS INT ORGANS
	V473	OTHER DIGESTIVE PROBLEMS
	V479	PROBLEMS WITH UNSPEC INT ORGANS
	V480	DEFICIENCES OF HEAD
	V481	DEFICIENCES OF NECK AND TRUNK
	V486	DISFIGUREMENTS OF HEAD
	V487	DISFIGUREMENTS NECK AND TRUNK
	V488	OTH PROBLEMS W HEAD/NECK/TRUNK
	V489	UNSPEC PROBLEMS HEAD/NECK/TRUNK
	V490	DEFICIENCIES OF LIMBS
	V491	MECHANICAL PROBLEMS WITH LIMBS
	V494	DISFIGUREMENTS OF LIMBS
	V495	OTHER PROBLEMS WITH LIMBS
	V498	OTH SPEC PROB INFLUENC HEALTH
	V499	UNSPEC PROBLEM W LIMBS/OTH PROB
	V503	ELECTIVE SURGERY EAR PIERCING
	V5049	OTH PROPHYLACTIC ORGAN REMOVAL
	V570	BREATHING EXERCISES
	V574	ORTHOPTIC TRAINING
	V5901	DONORS OF WHOLE BLOOD
	V5902	DONORS OF STEM CELLS
	V5909	DONORS OF OTHER BLOOD
	V591	SKIN DONOR
	V592	BONE DONOR
	V593	BONE MARROW DONOR
	V594	KIDNEY DONOR
	V595	CORNEA DONOR
	V596	LIVER DONOR
	V598	OTHER SPEC ORGAN/TISSUE DONOR
	V599	UNSPECIFIED ORGAN/TISSUE DONOR
	V640	VACCIN NOT DONE CONTRAINDICATN
	V641	SURG/PROC NOT DONE CONTRAIND
	V642	SURG/PROC NOT DONE PT DECISION
	V643	PROCEDURE NOT DONE OTH REASONS
	V644	LAPAROSCOPIC SURGICAL PROCEDURE CONVERTED TO OPEN PROCEDURE
	V650	HEALTHY PERSON ACCOMP SICK PERS
	V682	REQUEST FOR EXPERT EVIDENCE
	V6881	REFERRAL OF PATIENT NO EXAM/TX
	V6889	OTH ENCOUNTER FOR ADMIN PURPOSE
	V689	ENCOUNTER FOR ADMIN PURPOSE NOS
	V718	OBSERV OTH SPEC SUSPECTED COND
	V719	OBSERV SUSPECTED COND UNSPEC
	V725	RADIOLOGICAL EXAMINATION NEC
	V726	LABORATORY EXAMINATION
	V7285	OTHER SPECIFIED EXAMINATION
	V729	UNSPECIFIED EXAMINATION

ACCS CELL
2059 Prophylactic Vaccination

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
2059 PROPHYLACTIC VACCINATION		
	V030	PROPH VACCINATION CHOLERA ALONE
	V031	PROPH VACCIN TYPHOID-PARATYPH
	V032	PROPH VACCINATION TUBERCULOSIS
	V033	PROPH VACCINATION PLAGUE
	V034	PROPH VACCINATION TULAREMIA
	V035	PROPH VACCINATION DIPHTHERIA
	V036	PROPH VACCINATION PERTUSSIS
	V037	PROPH VACCINATN TETANUS TOXOID
	V0381	PROPH VACCIN HEMOPH INFLUENZA B
	V0382	PROPH VACCIN STREP PNEUMONIAE
	V0389	PROPH VACCINATION OTH BACT DIS
	V039	PROPH VACCINATN UNSPEC BACT DIS
	V040	PROPH VACCINATION POLIOMYELITIS
	V041	PROPH VACCINATION SMALLPOX
	V042	PROPH VACCINATION MEASLES ALONE
	V043	PROPH VACCINATION RUBELLA ALONE
	V044	PROPH VACCINATION YELLOW FEVER
	V045	PROPH VACCINATION RABIES
	V046	PROPH VACCINATION MUMPS ALONE
	V047	PROPH VACCINATION COMMON COLD
	V048	PROPH VACCINATION INFLUENZA
	V050	VACCIN ARTHRO-BORNE VIR ENCEPH
	V051	VACCIN OTH ARTHRO-BORNE VIR DIS
	V052	PROPH VACCINATION LEISHMANIASIS
	V053	PROPH VACCINATN VIRAL HEPATITIS
	V054	PROPH VACCINATION VARICELLA
	V058	PROPH VACCINATION OTH SPEC DIS
	V059	PROPH VACCINATION UNSPEC DIS
	V060	PROPH VACCINATN CHOLERA AND TAB
	V061	PROPHYLACTIC VACCINATION DTP
	V062	PROPH VACCINATION DTP AND TAB
	V063	PROPH VACCINATION DTP AND POLIO
	V064	PROPHYLACTIC VACCINATION MMR
	V065	PROPH VACCIN TETANUS-DIPHTHERIA
	V066	PROPH VACCIN STREP PNEUM/INFLUE
	V068	PROPH VACCINATN OTH COMBIN DIS
	V069	PROPH VACCINATN UNSPEC COMBIN
	V071	DESENSITIZATION TO ALLERGENS
	V072	PROPHYLACTIC IMMUNOTHERAPY
	V0731	PROPH FLUORIDE ADMINISTRATION
	V0739	OTHER PROPHYLACTIC CHEMOTHERAPY
	V582	BLOOD TRANSFUSION NO REPORT DX
	V681	ENCOUNTER ISSUE REPEAT PRESCRPT
	V727	DIAGNOSTIC SKIN/SENSITIZN TEST

ACCS CELL
2060 Therapeutic Medical Counseling

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
2060 THERAPEUTIC MEDICAL COUNSELING		
	31383	CHILD/ADOL ACADEMIC UNDERACHIEV
	V400	PROBLEMS WITH LEARNING
	V401	PROBLEMS WITH COMMUNICATION
	V402	OTHER MENTAL PROBLEMS
	V403	OTHER BEHAVIORAL PROBLEMS
	V409	UNSPEC MENTAL/BEHAVIORAL PROB
	V417	PROBLEMS WITH SEXUAL FUNCTION
	V418	OTH PROBLEMS SPECIAL FUNCTIONS
	V419	UNSPEC PROBLEM SPECIAL FUNCTION
	V600	LACK OF HOUSING
	V601	INADEQUATE HOUSING
	V602	INADEQUATE MATERIAL RESOURCES
	V603	PERSON LIVING ALONE
	V604	NO OTH HOUSEHD MEMB RENDER CARE
	V605	HOLIDAY RELIEF CARE
	V606	PERSON LIVING RESIDENT INSTITUT
	V608	OTH HOUSING/ECONOM CIRCUMSTANCE
	V609	HOUSING/ECONOM CIRCUMSTANCE NOS
	V610	FAMILY DISRUPTION
	V6110	COUNSELING FOR MARITAL AND PARTNER PROBLEMS,UNSPECIFIED
	V6111	COUNSELING FOR VICTIM OF SPOUSAL AND PARTNER ABUSE
	V6112	COUNSELING FOR PERPETRATOR OF SPOUSAL AND PARTNER ABUSE
	V6120	COUNSELING FOR PARENT-CHILD PROBLEM, UNSPECIFIED
	V6121	COUNSELING FOR VICTIM OF CHILD ABUSE
	V6122	COUNSELING FOR PERPETRATOR OF PARENTAL CHILD ABUSE
	V6129	OTHER PARENT-CHILD PROBLEMS
	V613	PROBLEMS W AGED PARENTS/IN-LAWS
	V6141	ALCOHOLISM IN FAMILY
	V6149	OTH HEALTH PROB WITHIN FAMILY
	V616	ILLEGITIMACY/ILLEGIT PREGNANCY
	V617	OTHER UNWANTED PREGNANCY
	V618	OTHER SPEC FAMILY CIRCUMSTANCES
	V619	UNSPEC FAMILY CIRCUMSTANCE
	V620	UNEMPLOYMENT
	V621	ADVERSE EFF WORK ENVIRONMENT
	V622	OTH OCCUPATION CIRCUM/MALADJUST
	V623	EDUCATIONAL CIRCUMSTANCES
	V624	SOCIAL MALADJUSTMENT
	V625	LEGAL CIRCUMSTANCES
	V626	REFUSAL TX RELIGION/CONSCIENCE
	V6281	INTERPERSONAL PROBLEMS NEC
	V6282	BEREAVEMENT UNCOMPLICATED
	V6283	COUNSELING FOR PERPETRATOR OF PHYSICAL/SEXUAL ABUSE
	V6289	OTH PSYCHOLOG/PHYSIC STRAIN NEC
	V629	PSYCHOSOCIAL CIRCUMSTANCE NOS
	V630	RESIDENCE REMOTE FR HOSP/FACIL
	V631	MED SERVICES IN HOME NOT AVAIL
	V632	PERSON AWAITING ADMIT ELSEWHERE

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
2060 THERAPEUTIC MEDICAL COUNSELING		
	V638	UNAVAIL OTH MEDICAL FACIL/CARE
	V639	UNAVAIL MEDICAL FACIL/CARE NOS
	V651	PERSON CONSULT FOR ANOTHER PERS
	V652	PERSON FEIGNING ILLNESS
	V6540	OTHER UNSPECIFIED COUNSELLING
	V6541	EXERCISE COUNSELLING
	V6542	SUBSTANCE USE/ABUSE COUNSELLING
	V6543	INJURY PREVENTION COUNSELLING
	V6544	HIV COUNSELLING
	V6545	COUNSEL/SEXUALLY TRANSMIT DIS
	V6549	OTHER SPECIFIED COUNSELLING
	V655	PERSON W FEARED COMPLAINT NO DX
	V658	OTH REASONS FOR SEEKING CONSULT
	V659	UNSPEC REASON FOR CONSULTATION
	V673	FOLLOW-UP EXAM PSYCH/TX MENT DX
	V680	ENCOUNTER FOR ISSUE MED CERTIF
	V690	LACK OF PHYSICAL EXERCISE
	V691	INAPPROPRIATE DIET/EATING HABIT
	V692	HIGH RISK SEXUAL BEHAVIOUR
	V693	GAMBLING AND BETTING
	V698	OTH PROBLEMS REL TO LIFESTYLE
	V699	UNSPEC PROBLEM REL TO LIFESTYLE
	V701	GEN PSYCH EXAM REQUEST AUTHRITY
	V702	GENERAL PSYCH EXAM OTHER/UNSPEC
	V7101	OBSERV ADULT ANTISOCIAL BEHAV
	V7102	OBSERV CHILD/ADOL ANTISOC BEHAV
	V7109	OBSERV OTH SUSPECT MENTAL COND

ACCS CELL
2062 Preoperative Exam

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
2062 PREOPERATIVE EXAM		
	V7281	PRE-OP CARDIOVASCULAR EXAM
	V7282	PRE-OP RESPIRATORY EXAMINATION
	V7283	OTHER SPECIFIED PRE-OP EXAM
	V7284	UNSPECIFIED PRE-OP EXAMINATION

ACCS CELL
2063 Private Practice Office Visit

ACCS Cell	ACCS Code	ACCS Description
2063 PRIVATE PRACTICE OFFICE VISIT		
	890001	MEDICAL OFFICE ASSESSMENT

ACCS CELL
2064 Therapy - No Intervention Code

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
2064 THERAPY - NO INTERVENTION CODE		
	V571	OTHER PHYSICAL THERAPY
	V5721	OCCUPATIONAL THERAPY
	V5722	VOCATIONAL THERAPY
	V573	SPEECH THERAPY
	V5789	CARE INVOLV OTH SPEC REHAB PROC
	V579	CARE INVOLV REHAB PROCEDURE NOS

ACCS CELL
2066 Contact/Carrier of Communicable Disease

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
2066 CONTACT/CARRIER OF COMMUNICABLE DISEASE		
	V010	CONTACT W/EXPOSURE TO CHOLERA
	V011	CONTACT W/EXPOSURE TUBERCULOSIS
	V012	CONTACT/EXPOSURE POLIOMYELITIS
	V013	CONTACT W/EXPOSURE TO SMALLPOX
	V014	CONTACT W/EXPOSURE TO RUBELLA
	V015	CONTACT W/EXPOSURE TO RABIES
	V016	CONTACT W/EXPOSURE VENEREAL DIS
	V017	CONTACT W/EXPOSURE OTH VIR DIS
	V018	CONTACT/EXPOSURE OTH COMMUN DIS
	V019	CONTACT/EXPOS UNSPEC COMMUN DIS
	V020	CARRIER/SUSPECT CARRIER CHOLERA
	V021	CARRIER/SUSPECT CARRIER TYPHOID
	V022	CARRIER/SUSPECT AMEBIASIS
	V023	CARRIER/SUSPECT OTH GI PATHOGEN
	V024	CARRIER/SUSPECT DIPHTHERIA
	V0251	CARRIER GROUP B STREPTOCOCCUS
	V0252	CARRIER OTHER STREPTOCOCCUS
	V0259	CARRIER OTH SPEC BACTERIAL DIS
	V0260	VIRAL HEPATITIS CARRIER,UNSPECIFIED
	V0261	HEPATITIS B CARRIER
	V0262	HEPATITIS C CARRIER
	V0269	OTHER VIRAL HEPATITIS CARRIER
	V027	CARRIER/SUSPECT GONORRHEA
	V028	CARRIER/SUSPECT OTHER VENEREAL
	V029	CARRIER/SUSPECT OTH INFECT ORG
	V070	NEED FOR ISOLATION
	V078	NEED FOR OTH SPEC PROPH MEASURE
	V079	NEED FOR UNSPEC PROPH MEASURE
	V08	ASYMPTOMATIC HIV INFECT STATUS

ACCS CELL
2067 Health Hazard Related to Personal/ Family History

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
2067 HEALTH HAZARD RELATED TO PERSONAL/ FAMILY HISTORY		
	V1000	PERSON HX MAL NEO GI TRACT NOS
	V1001	PERSONAL HX MAL NEOPLASM TONGUE
	V1002	PERSON HX MAL NEO OTH ORAL/PHAR
	V1003	PERSONAL HX MAL NEO ESOPHAGUS
	V1004	PERSONAL HX MAL NEO STOMACH
	V1005	PERSONAL HX MAL NEO LRG INTEST
	V1006	PERSONAL HX MAL NEO RECTUM/ANUS
	V1007	PERSONAL HX MAL NEOPLASM LIVER
	V1009	PERSON HX MAL NEO OTH GI TRACT
	V1011	PERSON HX MAL NEO BRONCHUS/LUNG
	V1012	PERSONAL HX MAL NEO TRACHEA
	V1020	PERSON HX MAL NEO RESP ORG NOS
	V1021	PERSONAL HX MAL NEOPLASM LARYNX
	V1022	PERSON HX MAL NEO NASAL/EAR/SIN
	V1029	PERSON HX MAL NEO OTH RESP ORG
	V103	PERSONAL HX MAL NEOPLASM BREAST
	V1040	PERSON HX MAL NEO F GEN ORG NOS
	V1041	PERSON HX MAL NEO CERVIX UTERI
	V1042	PERSON HX MAL NEO OTHER UTERUS
	V1043	PERSONAL HX MAL NEOPLASM OVARY
	V1044	PERSON HX MAL NEO OTH F GEN ORG
	V1045	PERSON HX MAL NEO M GEN ORG NOS
	V1046	PERSONAL HX MAL NEO PROSTATE
	V1047	PERSONAL HX MAL NEOPLASM TESTIS
	V1048	PERSONAL HX MAL NEO EPIDIDYMIS
	V1049	PERSON HX MAL NEO OTH M GEN ORG
	V1050	PERSON HX MAL NEO URIN ORG NOS
	V1051	PERSONAL HX MAL NEO BLADDER
	V1052	PERSONAL HX MAL NEOPLASM KIDNEY
	V1059	PERSON HX MAL NEO OTH URIN ORG
	V1060	PERSONAL HISTORY LEUKEMIA NOS
	V1061	PERSONAL HX LYMPHOID LEUKEMIA
	V1062	PERSONAL HX MYELOID LEUKEMIA
	V1063	PERSONAL HX MONOCYTIC LEUKEMIA
	V1069	PERSONAL HISTORY OTHER LEUKEMIA
	V1071	PERSON HX LYMPHO/RETICULOSARCOM
	V1072	PERSONAL HX HODGKIN'S DISEASE
	V1079	PERSONAL HX OTH LYMPH/HEMAT NEO
	V1081	PERSONAL HX MAL NEOPLASM BONE
	V1082	PERSONAL HX MAL MELANOMA SKIN
	V1083	PERSONAL HX OTH MAL NEO SKIN
	V1084	PERSONAL HX MAL NEOPLASM EYE
	V1085	PERSONAL HX MAL NEOPLASM BRAIN
	V1086	PERSON HX MAL NEO OTH NERV SYS
	V1087	PERSONAL HX MAL NEO THYROID
	V1088	PERSON HX MAL NEO OTH ENDO/REL
	V1089	PERSONAL HX OTHER MAL NEOPLASM
	V109	PERSONAL HX UNSPEC MAL NEOPLASM
	V110	PERSONAL HISTORY SCHIZOPHRENIA
	V111	PERSONAL HX AFFECTIVE DISORDERS
	V112	PERSONAL HISTORY OF NEUROSIS

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
2067 HEALTH HAZARD RELATED TO PERSONAL/ FAMILY HISTORY		
	V113	PERSONAL HISTORY OF ALCOHOLISM
	V118	PERSONAL HX OTH MENTAL DISORDER
	V119	PERSONAL HX MENTAL DISORDER NOS
	V1200	PERSONAL HX INFECT/PARASIT DIS
	V1201	PERSONAL HX OF TUBERCULOSIS
	V1202	PERSONAL HX OF POLIOMYELITIS
	V1203	PERSONAL HISTORY OF MALARIA
	V1209	PERSON HX OTH INF/PARASITIC DIS
	V121	PERSONAL HX NUTRITIONAL DEFIC
	V122	PERSON HX ENDO/MET/IMMUN DISORD
	V123	PERSONAL HX DIS BLOOD/FORM ORG
	V1240	PERSONAL HISTORYOF UNSPECIFIED DISORDER OF NERVOUS SYSTEM AND SENSE ORGANS
	V1241	PERSONAL HISTORY OF BENIGN NEOPLASM OF THE BRAIN
	V1249	PERSONAL HISTORY OF OTHER DISORDERS OF NERVOUS SYSTEM AND SENSE ORGANS
	V1250	PERSONAL HX UNSPEC CIRC DISEASE
	V1251	PERSON HX VENOUS THROM & EMBOLISM
	V1252	PERSONAL HX THROMBOPHLEBITIS
	V1259	PERSONAL HX OTHER DIS OF CIRC SYST
	V126	PERSONAL HX DIS RESPIRATORY SYS
	V1270	PERSONAL HX UNSPEC DIGESTIV DIS
	V1271	PERSONAL HX PEPTIC ULCER DIS
	V1272	PERSONAL HX COLONIC POLYPS
	V1279	PERSON HX OTH DIGESTIVE SYS DIS
	V1300	PERSON HX UNSPEC URINARY DISORD
	V1301	PERSONAL HX OF URINARY CALCULI
	V1309	PERSON HX OTH URINARY SYS DISOR
	V131	PERSONAL HX TROPHOBLASTIC DIS
	V132	PERSONAL HX OTH GEN SYS/OBS DIS
	V133	PERSONAL HX DIS SKIN/SUBCU TISS
	V134	PERSONAL HISTORY OF ARTHRITIS
	V135	PERSONAL HX OTH MUSCULOSKEL DIS
	V1361	PERSONAL HISTORY HYPOSPADIAS
	V1369	PERSONAL HX OTH CONGEN MALFOR
	V137	PERSONAL HX PERINATAL PROBLEMS
	V138	PERSONAL HX OTHER SPEC DISEASES
	V139	PERSONAL HISTORY UNSPEC DISEASE
	V140	PERSONAL HX ALLERGY PENICILLIN
	V141	PERSON HX ALLERG OTH ANTIBIOTIC
	V142	PERSONAL HX ALLERGY SULFONAMIDE
	V143	PERSON HX ALLERG OTH ANTIINFECT
	V144	PERSONAL HX ALLERGY ANESTHETIC
	V145	PERSONAL HX ALLERGY NARCOTIC
	V146	PERSONAL HX ALLERGY ANALGESIC
	V147	PERSON HX ALLERGY SERUM/VACCINE
	V148	PERSON HX ALLERGY OTH MEDICINAL
	V149	PERSON HX ALLERGY MEDICINAL NOS
	V150	PERSON HX ALLERGY NOT MEDICINAL
	V151	PERSON HX SURG HEART/GRT VESSEL
	V152	PERSON HX SURG OTH MAJOR ORGANS
	V153	PERSONAL HISTORY OF IRRADIATION
	V1541	HISTORY OF PHYSICAL ABUSE
	V1542	HISTORY OF EMOTIONAL ABUSE
	V1549	OTHER PSYCHOLOGICAL TRAUMA
	V155	PERSONAL HISTORY OF INJURY
	V156	PERSONAL HISTORY OF POISONING

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
2067 HEALTH HAZARD RELATED TO PERSONAL/ FAMILY HISTORY		
	V157	PERSONAL HISTORY CONTRACEPTION
	V1581	PERSON HX NONCOMPLIANCE MED TX
	V1582	HISTORY OF TOBACCO USE
	V1584	PERSONAL HX EXPOSURE TO ASBESTOS
	V1585	PERS HX EXP TO POTEN HAZ BODY FLUI
	V1586	PERSONAL HX EXPOSURE TO LEAD
	V1589	PERSON HX OTH HAZARD TO HEALTH
	V159	PERSON HX HAZARD TO HEALTH NOS
	V160	FAMILY HX MAL NEOPLASM GI TRACT
	V161	FAMILY HX MAL NEO TRACH/BR/LUNG
	V162	FAMILY HX MAL NEO OTH RESP ORG
	V163	FAMILY HX MAL NEOPLASM BREAST
	V1640	FAMILY HISTORY OF MALIGNANT NEOPLASM OF GENITAL ORGAN UNSPECIFIED
	V1641	FAMILY HISTORY OF MALIGNANT NEOPLASM OVARY
	V1642	FAMILY HISTORY OF MALIGNANT NEOPLASM PROSTATE
	V1643	FAMILY HISTORY OF MALIGNANT NEOPLASM TESTIS
	V1649	FAMILY HISTORY OF MALIGNANT NEOPLASM OTHER GENITAL ORGANS
	V1651	FAM HX MALIGNANT NEOPL KIDNEY
	V1659	FAM HX OTH MAL NEO URINARY ORG
	V166	FAMILY HISTORY OF LEUKEMIA
	V167	FAMILY HX OTHER LYMPH/HEMAT NEO
	V168	FAMILY HX OTH SPEC MAL NEOPLASM
	V169	FAMILY HX UNSPEC MAL NEOPLASM
	V170	FAMILY HX PSYCHIATRIC CONDITION
	V171	FAMILY HX STROKE (CEREBROVASC)
	V172	FAMILY HX OTH NEUROLOGICAL DIS
	V173	FAMILY HX ISCHEMIC HEART DIS
	V174	FAMILY HX OTHER CARDIOVASC DIS
	V175	FAMILY HISTORY OF ASTHMA
	V176	FAMILY HX OTHER CHR RESP COND
	V177	FAMILY HISTORY OF ARTHRITIS
	V178	FAMILY HX OTHER MUSCULOSKEL DIS
	V180	FAMILY HX OF DIABETES MELLITUS
	V181	FAMILY HX OTH ENDO/MET DISEASES
	V182	FAMILY HISTORY OF ANEMIA
	V183	FAMILY HX OTHER BLOOD DISORDERS
	V184	FAMILY HX OF MENTAL RETARDATION
	V185	FAMILY HX DIGESTIVE DISORDERS
	V1861	FAMILY HX POLYCYSTIC KIDNEY
	V1869	FAMILY HX OTHER KIDNEY DISEASES
	V187	FAMILY HX OTH GENITOURINARY DIS
	V188	FAMILY HX INFECTIOUS DISEASES
	V190	FAMILY HX BLINDNESS/VISUAL LOSS
	V191	FAMILY HX OTHER EYE DISORDERS
	V192	FAMILY HX DEAFNESS/HEARING LOSS
	V193	FAMILY HX OTHER EAR DISORDERS
	V194	FAMILY HISTORY SKIN CONDITIONS
	V195	FAMILY HX CONGENITAL ANOMALIES
	V196	FAMILY HX OF ALLERGIC DISORDERS
	V197	FAMILY HISTORY OF CONSANGUINITY
	V198	FAMILY HISTORY OTHER CONDITIONS

ACCS CELL
2068 Routine Health Supervision

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
2068 ROUTINE HEALTH SUPERVISION		
	V200	HEALTH SUPERVISION OF FOUNDLING
	V201	OTH HLTHY INF/CHILD RECEIV CARE
	V202	ROUTINE INF/CHILD HEALTH CHECK
	V210	PERIOD RAPID GROWTH CHILDHOOD
	V211	PUBERTY
	V212	OTHER ADOLESCENCE
	V218	OTH CONSTITUTIONAL STATES DEVEL
	V219	CONSTITUTIONAL STATES DEVEL NOS
	V700	ROUTINE GEN MED EXAM HLTH FACIL
	V703	OTH MED EXAM FOR ADMIN PURPOSES
	V704	EXAM FOR MEDICOLEGAL REASONS
	V705	HEALTH EXAM DEFINED SUBPOPULATN
	V706	HEALTH EXAM POPULATION SURVEYS
	V707	EXAM NORM COMPAR/CONTR RESEARCH
	V708	OTH SPEC GEN MEDICAL EXAMINATN
	V709	UNSPEC GENERAL MEDICAL EXAM

ACCS CELL
2069 Postsurgical Status

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
2069 POSTSURGICAL STATUS		
	V429	UNSPEC ORGAN/TISS TRANSPLANT
	V4360	UNSPEC JOINT REPLACEMENT STATUS
	V4361	SHOULDER JOINT REPLACED STATUS
	V4362	ELBOW JOINT REPLACEMENT STATUS
	V4363	WRIST JOINT REPLACEMENT STATUS
	V4364	HIP JOINT REPLACEMENT STATUS
	V4365	KNEE JOINT REPLACEMENT STATUS
	V4366	ANKLE JOINT REPLACEMENT STATUS
	V4369	OTHER JOINT REPLACEMENT STATUS
	V4381	LARYNX REPLACED OTHER MEANS
	V4382	BREAST REPLACED OTHER MEANS
	V4383	ORG/TIS REPL BY ARTIFICIAL SKIN
	V4389	OTH ORG/TISS REPLACED OTHER MEANS
	V440	TRACHEOSTOMY STATUS
	V441	GASTROSTOMY STATUS
	V442	ILEOSTOMY STATUS
	V443	COLOSTOMY STATUS
	V444	OTH ARTIFICIAL OPENING GI TRACT
	V4450	CYSTOSTOMY STATUS UNSPECIFIED
	V4451	CUTANEOUS-VESICOSTOMY STATUS
	V4452	APPENDICO-VESICOSTOMY STATUS
	V4459	OTHER CYSTOSTOMY STATUS
	V446	OTH ARTIFIC OPENING URIN TRACT
	V447	ARTIFICIAL VAGINA STATUS
	V448	OTHER ARTIFICIAL OPENING STATUS
	V449	UNSPEC ARTIFIC OPENING STATUS
	V4500	UNSPEC CARDIAC DEVICE IN SITU

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
2069 POSTSURGICAL STATUS		
	V4501	CARDIAC PACEMAKER IN SITU
	V4502	IMPLANT CARDIAC DEFIB IN SITU
	V4509	OTH SPEC CARDIAC DEVICE IN SITU
	V451	RENAL DIALYSIS STATUS
	V452	CEREBROSPIN FLUID DRAINAGE DEV
	V453	INTEST BYPASS/ANASTOMOS STATUS
	V454	ARTHRODESIS STATUS
	V4571	ACQUIRED ABSENCE OF BREAST
	V4572	ACQUIRED ABSENCE OF INTESTINE(LARGE)(SMALL)
	V4573	ACQUIRED ABSCENCE OF KIDNEY
	V4581	AORTOCORONARY BYPASS STATUS
	V4582	PTCA STATUS
	V4583	BREAST IMPLANT REMOVAL STATUS
	V4589	OTHER POSTSURGICAL STATES
	V4960	UNSPEC LEVEL UPP LIMB AMP STAT
	V4961	THUMB AMPUTATION STATUS
	V4962	OTH FINGER(S) AMPUTATION STATUS
	V4963	HAND AMPUTATION STATUS
	V4964	WRIST AMPUTATION STATUS
	V4965	BELOW ELBOW AMPUTATION STATUS
	V4966	ABOVE ELBOW AMPUTATION STATUS
	V4967	SHOULDER AMPUTATION STATUS
	V4970	UNSPEC LEVEL LOW LIMB AMP STAT
	V4971	GREAT TOE AMPUTATION STATUS
	V4972	OTHER TOE(S) AMPUTATION STATUS
	V4973	FOOT AMPUTATION STATUS
	V4974	ANKLE AMPUTATION STATUS
	V4975	BELOW KNEE AMPUTATION STATUS
	V4976	ABOVE KNEE AMPUTATION STATUS
	V4977	HIP AMPUTATION STATUS
	V558	ATTENTION OTH SPEC ARTIFIC OPEN
	V559	ATTENTION UNSPEC ARTIFIC OPEN
	V5849	OTH SPEC AFTERCARE FOLL SURGERY
	V5889	OTHER SPECIFIED AFTERCARE
	V589	UNSPECIFIED AFTERCARE

ACCS CELL
2070 Follow-up/Convalescence

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
2070 FOLLOW-UP/CONVALESCENCE		
	V5861	LONG TERM (CURRENT) USE OF ANTICOA
	V5862	LONG TERM (CURR) USE OF ANTIBIOTICS
	V5869	LONG TERM (CURR) USE OF OTHER MED
	V660	CONVALESCENCE FOLLOWING SURGERY
	V661	CONVALESCENCE FOLL RADIOTHERAPY
	V662	CONVALESCENCE FOLL CHEMOTHERAPY
	V663	CONVALESCENCE PSYCH/TX MENT DIS
	V664	CONVALESCENCE FOLL TX FRACTURE
	V665	CONVALESCENCE FOLLOWING OTH TX
	V666	CONVALESCENCE FOLL COMBIN TX
	V667	ENCOUNTER FOR PALLIATIVE CARE
	V669	UNSPECIFIED CONVALESCENCE
	V670	FOLLOW-UP EXAM FOLL SURGERY
	V671	FOLLOW-UP EXAM RADIOTHERAPY
	V672	FOLLOW-UP EXAM CHEMOTHERAPY
	V6751	FOLLOW-UP HIGH-RISK MEDIC NEC
	V6759	FOLLOW-UP EXAM FOLLOWING OTH TX
	V676	FOLLOW-UP EXAM FOLL COMBIN TX
	V679	UNSPEC FOLLOW-UP EXAMINATION

ACCS CELL
2071 Screening Exam

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
2071 SCREENING EXAM		
	V730	SPECIAL SCREENING POLIOMYELITIS
	V731	SPECIAL SCREENING FOR SMALLPOX
	V732	SPECIAL SCREENING FOR MEASLES
	V733	SPECIAL SCREENING FOR RUBELLA
	V734	SPECIAL SCREENING YELLOW FEVER
	V735	SPEC SCREEN OTH ARTHROBORNE VIR
	V736	SPECIAL SCREENING FOR TRACHOMA
	V7388	SPECIAL SCREEN OTH SPEC CHLAMYD
	V7389	SPECIAL SCREEN OTH SPEC VIR DIS
	V7398	SPECIAL SCREEN CHLAMYD DIS NOS
	V7399	SPECIAL SCREEN VIRAL DIS NOS
	V740	SPECIAL SCREENING FOR CHOLERA
	V741	SPEC SCREEN PULM TUBERCULOSIS
	V742	SPECIAL SCREENING FOR LEPROSY
	V743	SPECIAL SCREENING DIPHTHERIA
	V744	SPECIAL SCREENING BACT CONJUNCT
	V745	SPECIAL SCREENING VENEREAL DIS
	V746	SPECIAL SCREENING FOR YAWS
	V748	SPEC SCREEN OTH BACT/SPIRO DIS
	V749	SPEC SCREEN BACT/SPIRO DIS NOS
	V750	SPECIAL SCREEN RICKETTSIAL DIS
	V751	SPECIAL SCREENING FOR MALARIA
	V752	SPECIAL SCREENING LEISHMANIASIS
	V753	SPECIAL SCREEN TRYPANOSOMIASIS

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
2071 SCREENING EXAM		
	V754	SPECIAL SCREEN MYCOTIC INFECT
	V755	SPECIAL SCREEN SCHISTOSOMIASIS
	V756	SPECIAL SCREENING FILARIASIS
	V757	SPEC SCREEN INTEST HELMINTHIAS
	V758	SPEC SCREEN OTH SPEC PARASITIC
	V759	SPEC SCREEN UNSPEC INFECT DIS
	V760	SPECIAL SCREEN MAL NEO RESP ORG
	V7610	BREAST SCREENING UNSPECIFIED
	V7611	SCREENING MAMMOGRAM OF HIGH-RISK PATIENT
	V7612	OTHER SCREENING MAMMOGRAM
	V7619	OTHER SCREENING BREAST EXAMINATION
	V762	SPECIAL SCREEN MAL NEO CERVIX
	V763	SPECIAL SCREEN MAL NEO BLADDER
	V7641	SPECIAL SCREEN MAL NEO RECTUM
	V7642	SPECIAL SCREEN MAL NEO ORAL CAV
	V7643	SPECIAL SCREEN MAL NEO SKIN
	V7644	SPECIAL SCREEN MAL NEO PROSTATE
	V7645	SPECIAL SCREEN MAL NEO TESTIS
	V7649	SPECIAL SCREEN MAL NEO OTH SITE
	V768	SPECIAL SCREEN OTHER NEOPLASM
	V769	SPECIAL SCREEN UNSPEC NEOPLASM
	V770	SPECIAL SCREEN THYROID DISORD
	V771	SPEC SCREEN DIABETES MELLITUS
	V772	SPECIAL SCREENING MALNUTRITION
	V773	SPECIAL SCREEN PHENYLKETONURIA
	V774	SPECIAL SCREENING GALACTOSEMIA
	V775	SPECIAL SCREENING FOR GOUT
	V776	SPECIAL SCREEN CYSTIC FIBROSIS
	V777	SPECIAL SCREEN OTHER ERROR MET
	V778	SPECIAL SCREENING FOR OBESITY
	V779	SPEC SCRN OTH/NOS ENDO/NUTR/MET
	V780	SPEC SCREEN IRON DEFIC ANEMIA
	V781	SPEC SCRN OTH/NOS DEFIC ANEMIA
	V782	SPEC SCRN SICKLE-CELL DIS/TRAIT
	V783	SPECIAL SCREEN OTH HEMOGLOBINOP
	V788	SPECIAL SCREEN OTH BLOOD DISORD
	V789	SPECIAL SCREEN BLOOD DISORD NOS
	V790	SPECIAL SCREENING DEPRESSION
	V791	SPECIAL SCREENING ALCOHOLISM
	V792	SPECIAL SCREENING MENTAL RETARD
	V793	SPECIAL SCREEN DEVEL HANDICAPS
	V798	SPECIAL SCREEN OTH MENT/HANDICP
	V799	SPECIAL SCREEN MENT/HANDICP NOS
	V800	SPECIAL SCREEN NEUROLOGIC COND
	V801	SPECIAL SCREENING FOR GLAUCOMA
	V802	SPECIAL SCREENING OTH EYE COND
	V803	SPECIAL SCREENING FOR EAR DIS
	V810	SPECIAL SCREEN ISCHEM HEART DIS
	V811	SPECIAL SCREENING HYPERTENSION
	V813	SPEC SCREEN CHR BRONCH/EMPHYSEM
	V814	SPEC SCREEN OTH/NOS RESPIRATORY
	V815	SPECIAL SCREENING NEPHROPATHY
	V816	SPECIAL SCREEN OTH/NOS GU COND
	V820	SPECIAL SCREEN SKIN CONDITIONS
	V821	SPEC SCRN RHEUMATOID ARTHRITIS
	V822	SPEC SCRN OTH RHEUMATIC DISORD

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
2071 SCREENING EXAM		
	V823	SPEC SCREEN CONGEN DISLOC HIP
	V824	POSTNAT SCREEN CHROMOSOMAL ANOM
	V825	SPEC SCREEN CHEM POISON/CONTAM
	V826	MULTIPHASIC SCREENING
	V828	SPECIAL SCREENING OTH SPEC COND
	V829	SPECIAL SCREENING UNSPEC COND

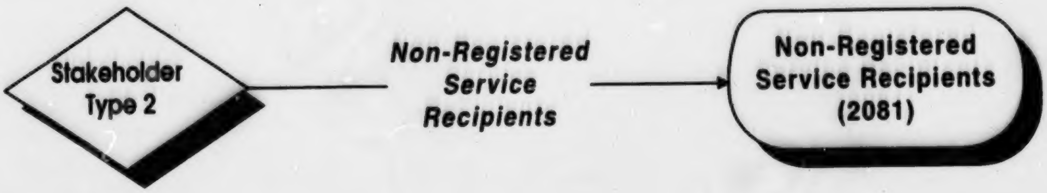
ACCS CELL
2072 Screening Exam – Genetics

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
2072 SCREENING EXAM – GENETICS	999901	SCREENING EXAM - GENETICS

ACCS CELL
2073 Genetic Counselling

ACCS Cell	ICD-9-CM Code	ICD-9-CM Diagnosis Description
2073 GENETIC COUNSELLING	944901	GENETIC COUNSELLING

Non-Registered Service Recipients Clinical Grouping


Stakeholder Type 2
Non-Registered Service Recipients
Non-Registered Service Recipients (2081)

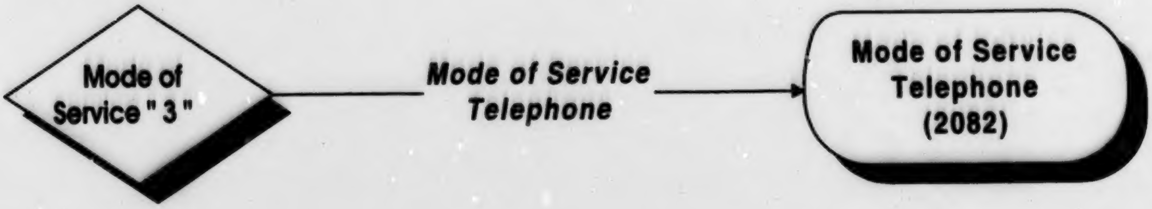
ACCS Grouper
04/98

ACCS CELL
2081 Non-Registered Service Recipient

ACCS Cell	
2081 NON-REGISTERED SERVICE RECIPIENT	
	ANY SERVICE EVENT WITH THE DATA ELEMENT "STAKEHOLDER TYPE" REPORTED AS "2" (AN ORGANIZATION)

Mode of Service Telephone

Clinical Grouping

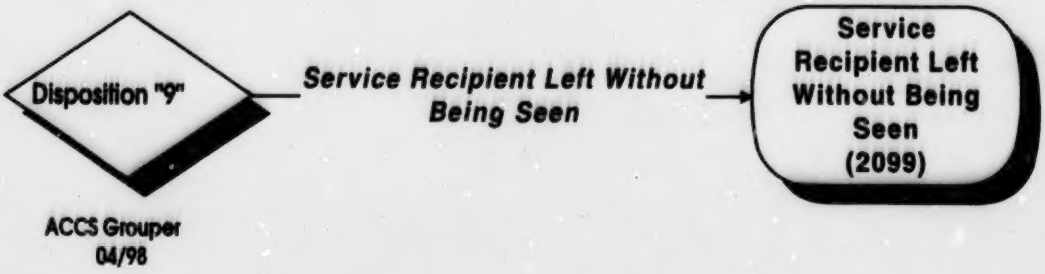

Mode of Service " 3 "
Mode of Service Telephone
Mode of Service Telephone (2082)

ACCS Grouper
04/00

ACCS CELL
2082 Mode of Service Telephone

ACCS Cell	
2082 MODE OF SERVICE TELEPHONE	
	ANY SERVICE EVENT WITH THE DATA ELEMENT "MODE OF SERVICE" REPORTED AS "3" (TELEPHONE/ELECTRONIC COMMUNICATION)

Service Recipient Left Without Being Seen Clinical Grouping


Disposition "9"
Service Recipient Left Without Being Seen
Service Recipient Left Without Being Seen (2099)
ACCS Grouper 04/98

ACCS CELL
2099 Service Recipient Left Without Being Seen

ACCS Cell	
2099 SERVICE RECIPIENT LEFT WITHOUT BEING SEEN	
	ANY SERVICE EVENT WITH THE DATA ELEMENT "DISPOSITION" REPORTED AS "9" (LEFT WITHOUT BEING SEEN)